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# ANALYZING PATIENT SATISFACTION LEVEL REGARDING MEDICAL SERVICES PROVIDED BY THE GOVERNMENT HOSPITALS IN JHARKHAND STATE

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Abstract: The objective is to study the label of patient satisfaction towards the medical service offered by the different government hospitals in Jharkhand State, India. Jharkhand was recognised as state since last 23 years only. Out of many factors of dismal health in Jharkhand, the chief factors are poverty, malnutrition, coverage of health-care services, being far below the IPHS norms, and absence of safe drinking water, food insecurity and sanitary conditions. The reason of this study is to observe that after 23 years of recognition as a state, how far the patients of Jharkhand is satisfied with the health services provided by different government hospitals. A total of 533 patients were included in the study to analyse patient satisfaction levels regarding medical services provided by hospitals include specific geographic area, diverse patient population, and various dimensions of healthcare services. To manage the load of the over crowd, multiple service units particularly in dressing room service, parenteral service, registration or appointment service and pharmacy services more windows need to be opened and more expert personnel need to be included. Findings of the survey reports suggest that the administrators and policy makers of the medical centres should focus on the dissatisfaction issues by the patient respondents and bring new policies to improve the quality of the service.

Keywords: Patient satisfaction, Hospitals, Poverty, Malnutrition, Geographic area

#### Introduction

Patient satisfaction is a vital measure of the quality of healthcare services provided by hospitals. It reflects the extent to which patients' expectations are met and their overall experience in receiving medical care. By understanding patients' perceptions and experiences, healthcare providers can enhance service delivery and promote patient-centred care [1,2]. To minimize the gap between the patients expectation and the service provided by , the patient satisfaction survey has been attracted the attention for the last three decades for achieving an effective action plan for the quality improvement in hospitals [3].

In recent years, patient satisfaction has gained significant attention in the healthcare industry. It is no longer sufficient for hospitals to focus solely on medical outcomes; they must also prioritize patient-centred care which is a major part in the healthcare mission and ensure that patients feel valued, respected, and involved in their own care [4,5]. By conducting systematic analyses of patient satisfaction, hospitals can gain valuable insights that drive continuous quality improvement initiatives. The analysis of patient satisfaction involves gathering feedback from patients through surveys or questionnaires. These instruments capture both quantitative and qualitative data, allowing for a comprehensive assessment of patient experiences. Quantitative data provides measurable indicators of satisfaction, such as rating scales or Likert-type scales, while qualitative data offers valuable insights into patients' perceptions, suggestions, and areas requiring improvement [3,6,7]. The decline in patient satisfaction is the result of mismatching of service given by the hospitals and service expected by the patient [8].

Various operational definitions such as medical services, hospitals, analysis, patient survey or questionnaire, satisfaction scores and continuous quality improvement can be established in the context of analysing patient satisfaction levels regarding medical services provided by hospitals [9.10]. By establishing these operational definitions, researchers and healthcare professionals can ensure clarity and consistency in assessing and analyzing patient satisfaction levels regarding medical services provided by hospitals [11].

The study of patient satisfaction levels include empowering patients, enhancing healthcare quality, building patient-centred care, cultivating loyalty and trust, unleashing better outcomes, igniting innovation and forging a competitive edge [12]. By embracing the study of patient satisfaction levels, hospitals embark on a transformative journey, where patients are empowered, healthcare quality soars, loyalty blossoms, innovation thrives, and the healthcare landscape is forever changed for the better.

Patient satisfaction levels regarding medical services provided by hospitals includes different types of hospitals, a specific geographic area, a diverse patient population, and various dimensions of healthcare services. The study aims to provide insights and recommendations to enhance patient satisfaction and improve the overall patient experience. Hence the primary objective of this study is to analyse patient satisfaction levels regarding medical services provided by hospitals. The study aims to achieve the specific objectives like assess overall patient satisfaction, identify key factors influencing patient satisfaction, explore demographic variations in patient satisfaction, identify areas of improvement, understand patient preferences and expectations, examine the correlation between patient satisfaction and healthcare outcomes and to provide actionable recommendations.

#### MATERIALS AND METHODS

Reliability relates to factors such as timely access to care, accurate diagnosis, and effective treatment outcomes. Patients value reliable and dependable healthcare services that meet their needs and expectations [13]. Responsiveness pertains to the willingness and readiness of healthcare providers to address patient needs, concerns, and inquiries. It involves factors such as promptness in scheduling appointments, efficient handling of inquiries, and responsiveness to patient feedback and complaints. Patients appreciate hospitals that are responsive and attentive to their needs [14]. Assurance encompasses the knowledge, competence, and professionalism of healthcare providers. Patients place importance on feeling confident and assured in the expertise and qualifications of the healthcare team. Clear and effective communication, patient education, and the establishment of trust between patients and providers contribute to this dimension [15,16]. Empathy relates to the provision of caring, compassionate, and personalized care. Patients value healthcare providers who demonstrate empathy, understanding, and respect for their individual circumstances and emotions. Effective communication, active listening, and patient-centered approaches contribute to enhancing empathy in healthcare interactions [17,18].

Tangibles refer to the physical facilities, equipment, and appearance of the hospitals. Patients appreciate a clean, comfortable, and well-equipped environment that reflects the quality of care provided. Tangibles can also include aspects such as online portals, appointment systems, and the convenience of healthcare services [19].

The framework provides a structured approach for evaluating the various factors that influence patient satisfaction, allowing for a comprehensive analysis of the medical services provided by hospitals. These may include theories of patient-centred care, patient engagement, and healthcare quality models. For the survey we prepared the team ready and kept inform them about how to collect the data and how it will be interpreted and to be acted on the results. The survey may be a fingerprint of the satisfaction level of the patients. Improvement of the projects on the basis of the comments or scores service can be planned better for the patients' next level satisfaction. The improvement of practice will be definitely helpful in the areas of weakness.

To improve the quality of medical services patient satisfaction survey is very helpful. For better care and treatment and happier patients, patient satisfaction survey is required to be done in regular interval in particular field and within particular areas. A patient satisfaction survey can be always useful to awake a physician when he/she is not interested in his or her responsibility. <sup>11</sup>The importance of patient satisfaction surveys has grown over the past 20 years, but there is little published research on changes attributable to survey feedback information [20], and these studies are sometimes conflicting in their findings. During the patient satisfaction survey, there may be chances of availability of positive reinforcement that has been already adopted by the service. The questions framed for the survey with this report are designed keeping the six major issues which patient satisfaction should be measured.

- 1- Quality Medical services (QMS).
- 2- Good communication and transparent policy between care provider and patient.
- 3- Interpersonal skills among medical professionals.
- 4- Financial aspects.
- 5- Care Accessibility.
- 6- Access to doctors and other medical professionals.

Basically the questions asked to the patients covered top three issues, during interaction with the patients.

- 1- Quality issues: Regarding satisfaction of patient for his/her medical care.
- 2- Access issues: Regarding convenience of availability of the appointment and referrals.
- 3- Inter-personal issues: Regarding sympathetic approach of physicians and staff caring.

In this report 12 questions were placed for the survey. The survey questions were kept brief and easy to understand. Biased and vague questions always were avoided. The questions were scored in two rang(s). Strongly agree or strongly disagree and excellent or poor. However the scoring should be of 10-point scales, each of rang should be of 5-point scale.

The questions included for the survey in questionnaire in this report are

- Q1- Based on your previous experience with our medical care facility, how likely are you to recommend this hospital?
- Q2-Did you have any issues arranging an appointment?
- Q3- How would you rate the professionalism of our staffs?
- Q4-How would you rate the investigative diagnosis process that you underwent?
- Q5-How would you satisfied about the expertise of the experts in this hospital?

- Q6- In comparison to other medical centres in your area how would you satisfied by the service of this hospital?
- Q7- Whether you are satisfied with the charges paid at your end in this hospital wherever applicable?
- Q8- How would you feel comfortable, when you are expressing your problems before a physician or other health workers in this hospital?
- Q9- Whether you are satisfied to conduct a swift diagnosis and prescription by the physician in this hospital?
- Q10- Would you satisfied with the pharmacy staff, who bill your health provider and collect the right deductible from you for your medicines?

The study on patient satisfaction levels regarding medical services provided by hospitals has several limitations that should be acknowledged. First, there may be sample bias, as the findings may not accurately represent the larger population due to the characteristics of the selected sample. Second, self-reporting bias could impact the data collected through surveys, as respondents may provide socially desirable or biased responses. Additionally, patient satisfaction is subjective by nature, making it challenging to capture and measure accurately. The study's scope might be limited to a specific geographic area or healthcare system, limiting the generalizability of the findings. The cross-sectional design of the study may hinder the ability to track changes in satisfaction over time and assess the impact of interventions. Non-response bias could also be a concern if certain patient groups are more likely to participate, potentially skewing the results. Finally, external factors, such as cultural or societal influences, may influence patient satisfaction but may not be fully accounted for in the study. It is important to consider these limitations when interpreting the study's results and drawing conclusions. This study is not included with the operation theatre facility, blood bank service, paediatric unit service, Special new-born Care unit, intensive care unit. Only OPD services of different hospitals were included.

A total of 533 patients were included in the study as stated in Table 1. The patients from the OPDs of the four different districts of Jharkhand state were included. In this report student volunteers engaged for the survey. Students of 3<sup>rd</sup> year B. Pharmacy conducted this survey in different particularly Government Medical centres of Jharkhand state, India during perusal of their internship. Six medical centres from four districts of Jharkhand state have been identified for the survey. To have a representative sample of state the selected districts included to the survey were East Singhbhum, Seraikela-kharsawan, Dhanbad and Giridih.

Sadar MGM Sadar **SNMMC** Anumandal SamodayikSwasth Hospital, Hospital, Hospital, Kendra, Dumaria Hospital Hospital, Dhanbad Ghatsila **JSR** Sakchi Seraikela Kharsawan No. of 185 176 53 47 38 34 **Patients** 

Table 1: Sampling of OPD patients from the selected hospitals

#### RESULTS AND DISCUSSION

The particular medical centres included for this survey were Sadar Hospital, Khasmahal, Jamshedpur, East Singhbhum, Jharkhand; M G M Hospital, Rajendra Nagar, Sakchi, Jamshedpur, Jharkhand; Sadar Hospital Seraikela, Seraikela-kharsawan, Jharkhand; Shahid Nirmal Mahato Medical College Hospital, Dhanbad, Jharkhand; Anumandal Hospital, Ghatsila, East Singhbhum, Jharkhand and Samodayik Swasth Kendra, Dumaria, Jharkhand.

The data revelled with Table 2 in the survey suggested that 45% male and 55% female patients were included. The maximum patients gave their response (41%) belongs to age group 16-30 years and 6% gave response belongs to age group 0-15 years. The major percentage of the respondents belongs to primary standard education (35%) and next to the respondents was illiterate (33%). Graphical interpretation of male and female patient respondents, participated in the survey are illustrated in Fig.1.

Table 2: Sex, age and education level of patients surveyed from the selected hospitals of Jharkhand

	Sadar	MGM	Sadar	SNMMC	Anumandal	SamodayikSwasth	Total
	Hospital JSR	Hospital,	Hospital,	Hospital,	Hospital,	Kendra, Dumaria = 34	=533
	= 185 (%)	Sakchi =	Seraikela	Dhanbad $= 47$	Ghatsila = 38	(%)	(%)
		176 (%)	Kharsawan	(%)	(%)		
			= 53 (%)				
Sex							
Male	87 (47)	73 (42)	21 (40)	23 (49)	17 (45)	19 (56)	240
							(45)
Female	98 (53)	103 (58)	32 (60)	24 (51)	21 (55)	15 (44)	293
							(55)
Age Group							
0-15	07 (4)	11 (6)	4 (8)	3 (6)	3 (8)	3 (9)	31 (6)
16-30	78 (42)	71 (40)	21 (40)	19 (41)	16 (42)	14 (41)	219
							(41)
31-50	63 (34)	59 (34)	17 (32)	15 (32)	12 (32)	11 (32)	177
							(33)
51 to Above	37 (20)	35 (20)	11 (20)	10 (21)	7 (18)	6 (18)	106
							(20)
Education L	evel	•	•	•	•		
Illiterate	63 (34)	57 (32)	18 (34)	15 (32)	12 (32)	10 (29)	175

							(33)
Only	62 (34)	61 (35)	17 (32)	18 (38)	13 (34)	13 (38)	184
Primary							(35)
Secondary	47 (25)	49 (28)	13 (25)	11 (24)	11 (29)	9 (27)	140
							(26)
Graduate	13 (7)	9 (5)	5 (9)	3 (6)	2 (5)	2 (6)	34 (6)
and above							

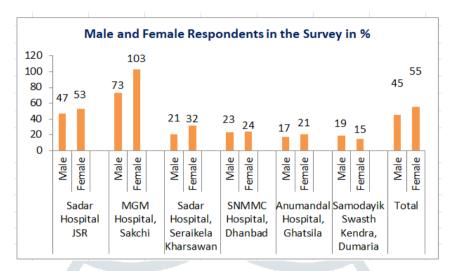


Figure 1: Graphical interpretation of male and female patient respondents, participated the survey

Infrastructures, communication facility, appointment issues, professionalism of the employees in the survey are the most important factors on which patients selected the medical centre. As the government of Jharkhand is quite serious to provide quality health care services, in order to reduce morbidity and mortality. The results in Table 3 revealed that more than 80% of respondents, given their recommendations in the favour of professionalism of the employees. Yes the issues regarding appointment may be due to the appreciated service provided by the medical centres, for which overcrowded patient level may be one of the reason responsible for creating the appointment issues. It seems that government of Jharkhand is really focusing to the health issues and as per the commitment they are really giving highest priority to the gender and human rights issues to disadvantaged groups and adolescents, with the aim of eliminating discrimination in the provision of health care at all levels and in all sectors. Graphical interpretation of respondents regarding the Professionalism of the Medical staffs are illustrated in Fig.2.

Table 3: Reasons for selecting these hospitals with reference to different satisfaction parameters of the patients'

144	ne 3. Iteasons i	or sciecting thes	c nospitais wit	in reference to ar	ilerent satisfaction	parameters of the patient	.5
	Sadar	MGM	Sadar	SNMMC	Anumandal	SamodayikSwasth	Total
	Hospital	Hospital,	Hospital,	Hospital,	Hospital, Ghatsil	Kendra, Dumaria = 34	=533
	JSR = 185	Sakchi= 176	Seraikela	Dhanbad =	= 38	,	(%)
			Kharsawan	47			(,,,,
			=53				
How likely	are you to reco	mmend this Me	dical Centre				
Excellent	183 (99)	173 (98)	47 (89)	44 (94)	33 (87)	29 (85)	509
							(95)
Poor	2(1)	3 (2)	6 (11)	3 (6)	5 (13)	5 (15)	24 (5)
Issues risin	g in arranging	an appointment					
Yes	173 (94)	167 (95)	43 (81)	43 (91)	24 (63)	16 (47)	466
							(87)
No	12 (6)	9 (5)	10 (19)	4 (9)	14 (37)	18 (53)	67 (13)
Professiona	lism of the stat	fs					
Excellent	181 (98)	173 (98)	48 (91)	46 (98)	36 (95)	33 (97)	517
							(97)
Not to	4(2)	3 (2)	5 (9)	1(2)	2 (5)	1 (3)	16 (3)
comment			. ,		, ,		
How would	you satisfied v	vith the service o	f this Medical	Centre, in comp	arison to other in y	our locality	
Excellent	184 (99)	172 (98)	49 (92)	45 (96)	34 (89)	30 (88)	514
							(96)
Average	1(1)	4 (2)	4 (8)	2 (4)	4(11)	4 (12)	19 (4)

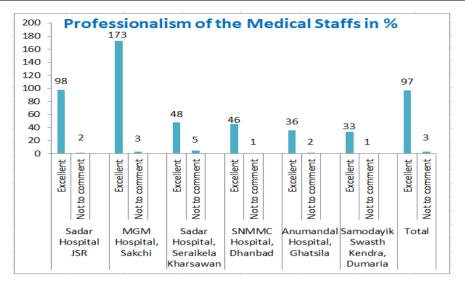


Figure 2: Graphical interpretation of respondents' impression regarding the Professionalism of the Medical staffs

Attributing to the results of the Table 4, it can be well understood that the respondents were satisfied with the facilities provided by the medical centres. It is obvious that there is always a beyond comfortable zone is always expected by the users. Analysing the results it was observed that more than 80% respondents given their opinion in the support of adequate availability of sitting arrangements, cleanliness, illumination of premises, toilet facilities, quality canteen, availability of drinking water and immunisation centres with the surveyed. 100% of the respondents reported regarding the availability of drinking water and immunisation facility in the respective medical centres.

Table 4: Patients' view on basic amenities and public health facilities according to selected attributes in different hospitals

	Sadar	MGM	Sadar	SNMMC	Anumandal	SamodayikSwasth	Total
	Hospital	Hospital,	Hospital,	Hospital,	Hospital,	Kendra, Dumaria =34	=533
	JSR = 185	Sakchi = 176	Seraikela	Dhanbad $= 47$	Ghatsila = 38		(%)
			Kharsawan				
			= 53				
Sitting arrangeme	ent for the pat	ients and atten	dants				
Adequate	164 (89)	154 (88)	45 (85)	39 (83)	35 (92)	31 (91)	468 (88)
Inadequate	21 (11)	22 (12)	8 (15)	8 (17)	3 (8)	3 (9)	65 (12)
Cleanliness	21 (11)	22 (12)	8 (13)	0 (17)	3 (8)	3 (9)	03 (12)
	183 (99)	147 (94)	46 (87)	14 (04)	24 (90)	31 (91)	485
Adequate	183 (99)	147 (84)	40 (87)	44 (94)	34 (89)	31 (91)	(91)
Inadequate	2(1)	29 (16)	7 (13)	3 (6)	4 (11)	3 (9)	48 (9)
Lighting arranger	nent						
Adequate	184 (99)	173 (98)	48 (91)	45 (96)	33 (87)	28 (82)	511 (96)
Inadequate	1 (1)	3 (2)	5 (9)	2 (4)	5 (13)	6 (18)	22 (4)
Toilet facilities							, , ,
Available Clean	173 (93)	153 (86)	39 (74)	39 (83)	31 (82)	29 (85)	464
	, ,	` '			, ,	, ,	(87)
Available Dirty	12 (7)	23 (14)	14 (16)	8 (17)	7 (18)	5 (15)	69 (13)
Canteen							
Available with	181 (98)	171 (97)	50 (94)	45 (96)	34 (89)	29 (85)	510
cleanliness and							(96)
fresh food							
Not Satisfactory	4(2)	5 (3)	3 (6)	2 (4)	4 (11)	5 (15)	23 (4)
<b>Drinking Water</b>							
Available	185 (100)	176 (100)	53 (100)	47 (100)	38 (100)	34 (100)	533 (100)
Not Available							(100)
Immunisation Cer	ntre						
Available	185 (100)	176 (100)	53 (100)	47 (100)	38 (100)	34 (100)	533
							(100)
Not Available							

There was mixed opinion found to be reported from the respondents regarding the service of the physicians and other experts. Regarding diagnosis and investigations more than 60% and less than 80% responds recorded from the sub divisional hospital and community whereas from remaining, respondents gave more than 80% positive responds. In total it was observed that more than 90% respondents gave their opinion in favour of Investigative diagnosis services provided by Table 5.

Table 5: Patients' view about the service of the Physicians and other experts in different hospitals

	Sadar	MGM	Sadar	SNMMC	Anumandal	SamodayikSwasth	Total=
	Hospital	Hospital,	Hospital,	Hospital,	Hospital,	Kendra, Dumaria=34	533(%)
	JSR =185	Sakchi=	Seraikela	Dhanbad= 47	Ghatsila= 38		
		176	Kharsawan=				
			53				
Investigative d	liagnosis proc	ess					
Excellent	177 (96)	171 (97)	47 (89)	45 (96)	29 (76)	23 (68)	492 (92)
Poor	8 (4)	5 (3)	6 (11)	2 (4)	9 (24)	11(32)	41 (8)
About the exp	ertise of the ex	xperts in this l	nospital	•		·	
Excellent	179 (97)	174	49	44 (94)	36 (95)	31 (91)	513 (96)
		(99)	(92)				
Poor	6 (3)	2(1)	4 (8)	3 (6)	2 (5)	3 (9)	20 (4)
Level of comfo	rtability, whe	n you are exp	ressing your pr	oblems before a	physician		•
Quite	169 (91)	163 (93)	48 (91)	43 (91)	35 (92)	31 (91)	489 (92)
Comfortable							
Not at all	16 (9)	13 (7)	5 (9)	4 (9)	3 (8)	3 (9)	44 (8)
comfortable							
How much sat	isfied regardi	ng conducting	of a swift diagr	nosis and prescri	ption		
Highly	179 (97)	173 (98)	48 (91)	45 (96)	33 (87)	29 (85)	507 (95)
Average	6 (3)	3 (2)	5 (9)	2 (4)	5 (13)	5 (15)	26 (5)
Level of satisfa	action with th	e pharmacy st	taff, who bill yo	ur health provid	er and collect the	right deductible from yo	ou for your
medicines		_	·			-	-
Excellent	183 (99)	173 (98)	51 (96)	45 (96)	36 (95)	33 (97)	521 (98)
Poor	2(1)	3 (2)	2 (4)	2 (4)	2 (5)	1 (3)	12 (2)

In case of level of comfortability, regarding expressing the problems before a physician, 92% respondents gave their free opinion. This exactly signifies the awareness on health issues among the people. Regarding conducting of a swift diagnosis and prescription and level of satisfaction with the pharmacy staff, who bill your health provider and collect the right deductible from you for your medicines, more than 95% respondents found satisfied. This might be the benefit of pradhanmantri janaushadhi yojana and other free medicine availability facilities by the government. Graphical interpretation showing 5 of satisfaction level by the respondents while discussing with physicians are shown in Fig.3.

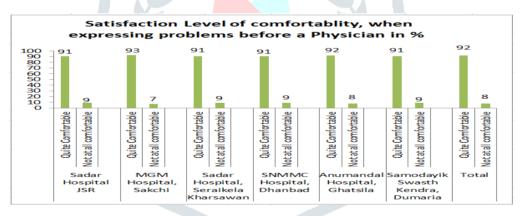


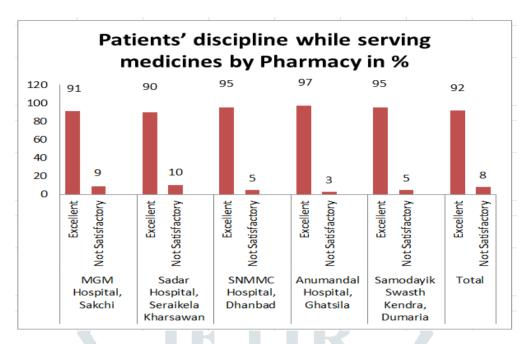
Figure 3: Graphical interpretation showing respondents' satisfaction level while discussing with physicians

Regarding pharmacy related services more out of total 533 respondents, 475 respondents were the beneficial users. However result of different respondents revealed that during distribution of medicines, other than sub-divisional and community, more than 10% respondents found not satisfied with the discipline issues (Table 6) (Fig. 4).

Table 6: Patients' view on pharmacy related services in different hospitals

	Sadar	MGM	Sadar	SNMMC	Anumandal	SamodayikSwasth	Total=					
	Hospital	Hospital,	Hospital,	Hospital,	Hospital,	Kendra,	475(%)					
	JSR =	Sakchi=	Seraikela	Dhanbad=39	Ghatsila=31	Dumaria=19						
	173	164	Kharsawan=49									
	Manner of the Pharmacist											
Good	169 (98)	161 (98)	47 (96)	37 (95)	30 (97)	18 (95)	462					
							(97)					
Satisfactory	4(2)	3 (2)	2 (4)	2 (5)	1 (3)	1 (5)	13 (3)					
		P	atients' discipline	while serving	medicines							
Excellent	157 (91)	149 (91)	44 (90)	37 (95)	30 (97)	18 (95)	435					
							(92)					
Not	16 (9)	15 (9)	5 (10)	2 (5)	1 (3)	1 (5)	40 (8)					
Satisfactory												

	Quality of drugs											
Satisfactory	171 (99)	157 (96)	48 (98)	36 (92)	30 (97)	18 (95)	460 (97)					
Not Satisfactory	2 (1)	7 (4)	1 (2)	3 (8)	1 (3)	1 (5)	15 (3)					



**Figure 4:** Graphical interpretation showing regarding the discipline measures by the respondents while serving medicines by the pharmacy

To overcome such disciplinary issues, more counters for issuing of medicines is suggested where population of patients are more. Regarding quality of drugs undoubtedly the initiations taken by central government as well as state government is appreciable which quite reflects with the results by the respondents. 97% of the respondents who were the beneficial users of pharmacy related services in different medical centres, they gave their consent on good quality of drugs provided. About dressing room services, opinions collected from 149 respondents out of 533 (Table 7).

Table 7: Patients' view on dressing room services in different hospitals

	Sadar	MGM	Sadar Hospital,	SNMMC	Anumandal	SamodayikSwasth	Total=
	Hospital	Hospital,	Seraikela	Hospital,	Hospital,	Kendra,	149
	JSR=	Sakchi=47	Kharsawan=27(%)	Dhanbad=19(%)	Ghatsila=9(%)	Dumaria=6(%)	(%)
	41(%)	(%)					
Manner of the	he Dressing	Personnel					
Good	36 (88)	33 (70)	19 (70)	16 (84)	9 (100)	6 (100)	119
							(80)
Satisfactory	5 (12)	14 (30)	8 (30)	3 (16)			30 (20)
Patients' opi	nion on ove	ercrowding			•	•	•
Yes	39 (95)	43 (91)	20 (74)	16 (84)			118 (79)
No	2 (5)	4 (9)	7 (26)	3 (16)	9 (100)	6 (100)	31 (21)
Promptness	in service	1 , ,			<u>, , , , , , , , , , , , , , , , , , , </u>	1 , ,	
Satisfactory	40 (98)	43 (91)	18 (67)	17 (89)	9 (100)	6 (100)	133 (89)
Not Satisfactory	1 (2)	4 (9)	9 (33)	2 (11)			16 (11)
Cleanliness	L						
Satisfactory	39 (95)	37 (79)	18 (67)	18 (95)	9 (100)	6(100)	127 (85)
Not Satisfactory	2 (5)	10 (21)	9 (33)	1 (5)			22 (15)

It was realized that apart from sub-divisional and community centres other medical centres, which were included in this survey, they need to be more cautious to overcome the objection. Out of 533 respondents 311 respondents gave their feedback on the facilities for

injection and immunisation provided by different medical centres included with this survey (Table 8). A satisfactory feedback more than 90% on manner of the administrator, disciplinary issues, and promptness was collected from different medical centres.

Table 8: Patients' view aboutiniection and immunisation facilities in different hospitals

	Table 6. I attents view abouting ection and minimum sation facilities in different hospitals									
	Sadar	MGM	Sadar	SNMMC	Anumandal	SamodayikSwasth	Total=311			
	Hospital	Hospital,	Hospital,	Hospital,	Hospital,	Kendra,	(%)			
	JSR =87	Sakchi=93	Seraikela	Dhanbad=39	Ghatsila=31(%)	Dumaria=18 (%)				
	(%)	(%)	Kharsawan=43	(%)						
			(%)							
Manner of th	ne Expert									
Good	85 (98)	89 (96)	38 (88)	37 (95)	28 (90)	17 (94)	294 (95)			
Satisfactory	2(2)	4 (4)	5 (12)	2 (5)	3 (10)	1 (6)	17 (5)			
Patients' opi	nion on over	crowding								
Yes	84 (97)	91 (98)	37 (86)	37 (95)	21 (68)	11 (61)	281 (90)			
No	3 (3)	2(2)	6 (14)	2 (5)	10 (32)	7 (39)	30 (10)			
Promptness										
Satisfactory	86 (99)	92 (99)	40 (93)	38 (97)	29 (94)	17 (94)	302 (97)			
Not	1(1)	1(1)	3 (7)	1 (3)	2 (6)	1 (6)	9 (3)			
Satisfactory										

#### **CONCLUSION**

Findings of the survey report suggests that the administrators and policy makers of the medical centres should focus on the dissatisfaction issues by the patient respondents and bring new policies to improve the quality of the service. To manage the load of the over crowd, multiple service units particularly in dressing room service, parenteral service, registration or appointment service and pharmacy services more windows need to be opened and more expert personnel need to be included. Thus the patients can be properly get the opportunity to be investigated and treated. Simultaneously time is a major factor for the patient as well as the employees of medical centres which can be properly utilised and this will be a great satisfaction point for the patient. Quality management team need to be associated with every medical centres who should only think and work on the quality development for the patients as well as internal employees' satisfaction.

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#### REFERENCES

- [1] Rai, P.S., Kumar, R.K., Srivastava, J., Sharma, L. (2010). Measuring Patient Satisfaction: A Case Study to Improve Quality of Care at Public Health Facilities. Indian Journal of Community Medicine (IJCM), 35 (1), 52-56.
- [2] Agrawal, D. (2006). Health sector reforms: Relevance in India. Indian Journal of Community Medicine (IJCM), 3, 220-222.
- [3] Al-Abri, R., Al-Balushi, A. (2014). Patient Satisfaction Survey as a Tool towards Quality Improvement. *Oman medical journal*,
- [4] Aerlyn, G.D., Paul, P.L. (2003). Patient Satisfaction Instruments used at Academic Medical Centers: Results of a Survey. American Journal of Medical Quality, 18(6), 265-9.
- [5] Jenkinson, C., Coulter, A., Bruster, S., Richards, N., Chandola, T. (2002). Patients' experiences and satisfaction with health care: Results of a questionnaire study of specific aspects of care. Quality & Safety in Health Care, 11, 335-339.
- [6] Satpathy, S., Tej, L., Satpathy, S., Malik, A., Singh, S., Ranjan, A., Chadda, R., Barre, V.P., Tiwari, S. K. (2022). A Systematic Review of Patient Satisfaction Scales and Their Applicability to Covid-19 Hospitalized Patients: Gaps and Emerging Needs. Journal of Patient Experience, 1-10.
- [7] Sarangi, B., Sahoo, J., Jana, U., Mohanta, G.P. (2023). Coronavirus disease 2019 (covid-19): public health emergency. *Indian* Drugs Journal, 60(5).
- [8] McKinley, R.K., Roberts, C. (2001). Patient satisfaction with out of hours primary medical care. *The International Journal for* Ouality in Health Care (IJOHC), 10(1), 23-28.
- [9] Manzoor, F., Wei, L., Hussain, A., Asif, M., Shah, S.I.A. (2019). Patient Satisfaction with Health Care Services; An Application of Physician's Behavior as a Moderator. International Journal of Environmental Research and Public Health (IJERPH), 16(18), 3318.
- [10] Karaca, A. and Durna, Z. (2019). Patient satisfaction with the quality of nursing care. Nursing Open journals, 6(2), 535-545.
- [11] Ferreira, D. C., Vieira, I., Pedro, M. I., Caldas, P., Varela, M. (2013). Patient Satisfaction with Healthcare Services and the Techniques used for its Assessment: A systematic Literature Review and Bibliometric analysis. Healthcare (Basel). 11(5), 639.
- [12] Calvillo, J., Roman, I., Roa, L.M. (2015). How technology is empowering patients? A literature review. Health Expectations, 18(5), 643-652.
- [13] Donabedian, A. (1980). The definition of quality and approaches to its assessment. The Journal of Healthcare Management (JHM).
- [14] Ware, Jr J.E. & Snyder, M.K. (1975). Dimensions of patient attitudes regarding doctors and medical care services. Medical Care, 13(8),669-682.
- [15] Richard, C., Lussier, M.T., Millette, B. (2023). Tanoubil. Healthcare providers and patients: an essay on the importance of professional assertiveness in healthcare today. Medical education online. 28(1), 2200586.

- [16] Mosadeghrad, A.M. (2014). Factors influencing healthcare service quality. *International Journal of Health Policy and Management (IJHPM)*, 3(2), 77-89.
- [17] Moudatsou, M., Stavropoulou, A., Philalithis, A., Koukouli, S. (2020). The role of Empathy in Health and Social Care Professionals. *Healthcare (Basel)*, 8(1), 26.
- [18] Guidi, C. and Travessa, C. (2021). Empathy in Patient care: from 'Clinical Empathy' to 'Empathic Concern'. *Medicine, Health Care and Philosophy*, 24(4), 573-585.
- [19] Sitzia, J. & Wood, N. (1997). Patient satisfaction: A review of issues and concepts. Social Science & Medicine. 45(12), 1829-1843.
- [20] Mary, D., Phil, C. & Heather, B. (2001). Seeking consumer views: what use are results of hospital patient satisfaction surveys. *The International Journal for Quality in Health Care (IJQHC)*, 13(6), 463-468.

