

Internship Training
at
International Institute of Health Management Research

Patient Satisfaction Survey at ECHS Polyclinic

By
Col. Sumit Pant
PG/18/082

Under the guidance of
Dr. Pradeep K Panda

Post Graduate Diploma in Hospital and Health Management
2018-2020



International Institute of Health Management Research
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ACKNOWLEDGEMENT

I extend my sincerest appreciations and gratitude for the whole hearted support extended by all those who directly or indirectly contributed to the completion of the report, 'Patient Satisfaction Survey at ECHS Polyclinic'.

I take this opportunity to personally thank all staff without whose cooperation, interest, time and unflinching support this report would not have been possible.

Herein, I would like to acknowledge the invaluable help and support extended by Dr Pradeep K Panda, who took me under his wings and granted me the permission and required authority to proceed with my study. His analytical guidance, corrective course piloting, critical appraisal and persistent supervision coupled with overwhelming support and relentless motivation helped me in shaping the report with all prudence.

I whole heartedly acknowledge the contribution of Dr Pradeep K Panda without whose contribution this study would not have been possible.

I would also like to thank personnel of ECHS for making painstaking available loads of information for study in order to carry out the review of literature.

I am indebted to all faculty and staff who went out of the way in providing overwhelming support and relentless motivation.

Col Sumit Pant

IIHMR

The certificate is awarded to

Col Sumit Pant

In recognition of having successfully completed his/ her

Internship in the department of

Hospital Management

and has successfully completed his/ her Project on

Patient Satisfaction Survey at ECHS Polyclinic

15 May 2020

International Institute of Health Management Research, New Delhi

He/ She comes across as a committed, sincere & diligent person who has a strong drive & zeal for learning.

We wish him/ her all the best for future endeavors.

Training & Development

Zonal Head-Human Resources

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This is to certify that **Col Sumit Pant**, student of Post Graduate Diploma in Hospital and Health Management (PGDHM) from International Institute of Health Management Research, New Delhi has undergone internship training at IIHMR from **15th Feb to 15th May 2020**.

The Candidate has successfully carried out the study assigned to him during the internship training and his approach to the study has been sincere, scientific and analytical.

The Internship is in fulfillment of the course requirements.

I wish him all success in his/her future endeavors.

Dr Pradeep K Panda
Dean, Academics and Student Affairs
IIHMR, New Delhi

Mrs Divya Aggarwal
Mentor
IIHMR, New Delhi

Certificate of Approval

The following dissertation titled, '**PATIENT SASTISFACTION SURVEY AT ECHS POLYCLINIC**' at **International institute Of Health Management Research, New Delhi** is hereby approved as a certified study in management carried out and presented in a manner satisfactorily to warrant its acceptance as a prerequisite for the award of **Post Graduate Diploma in Health and Hospital Management** for which it has been submitted. It is understood that by this approval the undersigned do not necessarily endorse or approve any statement made, opinion expressed or conclusion drawn therein but approve the dissertation only for the purpose it is submitted.

Dissertation Examination Committee for evaluation of dissertation.

Name

Signature

Certificate from Dissertation Advisory Committee

This is to certify that **Col Sumit Pant**, a graduate student from the **Post Graduate Diploma in Health and Hospital Management** has worked under our guidance and supervision. He/ She is submitting this dissertation titled “**PATIENT SATISFACTION SURVEY AT ECHS POLYCLINIC**” at “**INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT RESEARCH, NEW DELHI**” in partial fulfillment of the requirements for the award of the **Post Graduate Diploma in Health and Hospital Management**.

This dissertation has the requisite standard and to the best of our knowledge no part of it has been reproduced from any other dissertation, monograph, report or book.

Dr Pradeep K Panda
Dean, Academics and Student Affairs
IIHMR, New Delhi

Mrs Divya Aggarwal
Mentor
IIHMR, New Delhi

**INTERNATIONAL INSTITUTE OF HEALTH MANAGEMENT
RESEARCH, NEW DELHI**

CERTIFICATE BY SCHOLAR

This is to certify that the dissertation titled **PATIENT SASTISFACTION SURVEY AT ECHS POLYCLINIC** and submitted by **Col Sumit Pant**, PG/18/082 under the supervision of Dr Pradeep K Panda for award of Post Graduate Diploma in Health and Hospital Management of the Institute carried out during the period from 15 th Feb to 15th May 2020 embodies my original work and has not formed the basis for the award of any degree, diploma associate ship, fellowship, title in this or any other Institute or other similar institution of higher learning.

Signature

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Name of the student:

Col Sumit Pant

Dissertation Institute:

IIHMR, New Delhi

Area of dissertation:

**PATIENT SASTISFACTION SURVEY AT
ECHS POLYCLINIC**

Attendance:

Adequate

Objectives met:

Yes

Deliverables:

Adequately contributed

Strengths:

Suggestions for improvement:

Suggestions for Institute (course curriculum, industry interaction, placement, alumni):

Signature of the Officer-in-charge/ Organization Mentor (Dissertation)

Date:

Place:

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ABOUT ECHS

1. **Historical Background.** Ex-servicemen Contributory Health Scheme (ECHS) was launched with effect from 01 April 2003. The Scheme aims to provide allopathic Medicare to Ex-servicemen pensioner and their dependents through a network of ECHS Polyclinics, Service medical facilities and civil empaneled/Govt hospitals spread across the country. The Scheme has been structured on the lines of CGHS to ensure cashless transactions, as far as possible, for the patients and is financed by the Govt of India.
2. ECHS is a flagship Scheme of the Ministry of Defense, Department of Ex-Servicemen Welfare. The aim of Scheme is to provide quality healthcare of Ex-servicemen pensioners and their dependents. As on 01 May 2015, a total of 15, 21,563 Ex-servicemen have enlisted with the Scheme along with 32, 02,610 dependents. Total beneficiaries of the Scheme thus amount to 47, 24,173.
3. Policy framework for the Scheme is laid down by the Govt and executive control is exercised by the Department of Ex-servicemen Welfare. The Scheme is managed through the existing infrastructure of the Armed Forces so as to minimize the administrative expenditure. The existing infrastructure includes command and control structure, spare capacity of Service Medical facilities (Hospitals and Medical Inspection Rooms), procurement organization for medical and non-medical equipment, Defence land and buildings etc. Station Commanders assisted by Senior Executive Medical Officers (SEMO) exercise direct control over the ECHS Polyclinics.
4. The Central Organisation ECHS is located at Delhi and functions under the Chiefs of Staff Committee through the Adjutant General in the Integrated Headquarters of Ministry of Defence (Army). The Central Organisation is headed by a Managing Director, a serving Major General.
5. There are 28 Regional Centres sanctioned by the Govt, all 28 Regional Centres are functional. All efforts are being made to make the remainder Regional Centres functional at the earliest possible.
6. ECHS Polyclinics are designed to provide 'Out Patient Care' which includes consultation, essential investigation and provision of medicines. Specialized consultations, investigations

and 'In Patient Care' (Hospitalization) is provided through spare capacity available in Service hospitals and **through civil hospitals empanelled with ECHS.**

PART II: PROJECT REPORT ON **WAITING TIME AND SATISFACTION SURVEY OF OPD** **ECHS PATIENTS**

SELECTION OF PROBLEM

Introduction

MI Rooms and designated hospitals are empanelled by the ECHS for providing IPD care, specialist consultancy and diagnostic testing facilities to the retired personnel's of the armed forces and their dependents. These brave sons/daughters of our great country and their dependents, some of whom are war widows/ lost their dear ones in action, have given the prime of their life for the motherland. Being a serving Army Officer, this study is useful to structure the overall approach to improving ECHS patient flow, improving processes and thereby reducing delays in the empanelled ECHS hospitals. The ECHS patients are around 25- 30 percent of total OPD patients. The process followed by the Hospitals for this clientele is a bit different from other patients. As the patient flow increases there may be increase in bottlenecks, which gives a poor overall impression for the ECHS patient. Also most of the ECHS patients are of old age, between 50 to 90 years, as they are retired. So to avoid this, reasons for increase in waiting time is analyzed to enhance patient satisfaction.

AIM

To study Waiting **Time and Satisfaction Survey of OPD ECHS Patients.**

OBJECTIVES

- Observe the waiting time of OPD ECHS Patient.
- To see the impact of prior appointments.
- To know the overall impression of the hospital in the mind of ECHS patient by OPD survey using questionnaire.

METHODOLOGY

Study Design: Time & Motion study.

Study Area: MI Rooms at Army Hospitals and Associated Hospitals.

Tools: A checklist was prepared wherein time taken from entering the hospital, completing formalities till consultation to begin for OPD ECHS patients was observed. A semi structured questionnaire was prepared for satisfaction survey.

Study Population: ECHS patients.

Sample Size: 75 for waiting time & 50 for satisfaction survey

Sampling Method: Convenient.

Data Analysis: Microsoft Excel

SOURCES OF INFORMATION

Primary sources:

- Survey method
- OPD Records
- Observation
- ECHS Policies and referral systems.

Secondary sources:

- Internet used as a source of theoretical information.
- Registers and records of hospital.
- Guidance by Managers

STRUCTURE OF THE STUDY:

Current study includes the literature review of other studies done on patient flow management, historical aspect of the organization in which project is done, ECHS referral policies for Private empanelled Hospitals and outpatient department is selected, data is collected, analyzed and inferences are given.

FINDINGS

A) TIME AND MOTION STUDIES AT OPD-

- A sample of 75 patients is selected for data collection from 12 most frequented OPD of various consultants. Eg departments like Paediatrician was left out as the ECHS patients are of older age.
- Sample represents the whole population.
- The data is collected in a format in which the time slots are given i.e., OP registration and documentation time, in time for consultation, waiting time for consultation, out time after consultation and consultation time along with the MRN number of the patient.
- The average of all the 12 OP departments were calculated and average time for registration, average waiting time for consultation to commence and average total waiting time have been calculated.
- The waiting time of ECHS patients was compared with that of other patients as well as the benchmark index of this KPI of the hospital.

KPI: Waiting Time for OPD Consultancy In Columbia Asia –

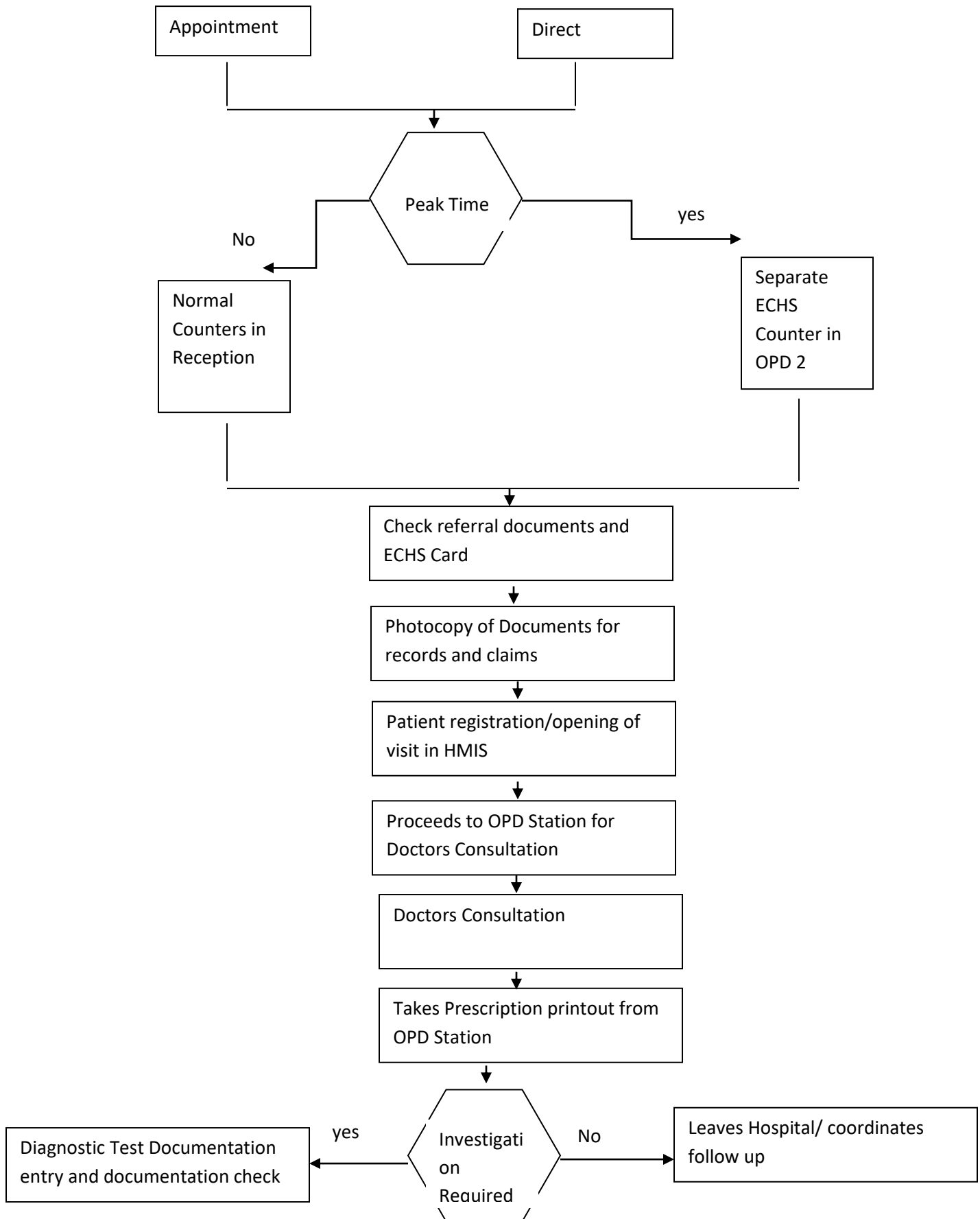
Waiting time for OPD consultancy followed in the Hospital is one of the five quality indices of the Department of Customer Care Services. The other four being-

- Time taken for Discharge- Cash Patients.
- Time Taken for Discharge – Insurance Patients.
- OP feedback Analysis.
- IP feedback Analysis.

The KPI for the OP is defined by the hospital as the time taken between once the registration of the patient is done and the visit is opened till the Patient enters the concerned Doctors Chamber. It does not consider the time taken by the patient in the queue to complete either the registration process or, in case of repeat patients, to report that he has arrived thereby “opening” his visit in the HMIS. The benchmark of this KPI is 15 minutes. However, from the patient’s point of view it is imperative that the time spent in the queue is also considered.

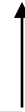
Workflow of ECHS OPD Patients –

The workflow of normal OPD Patients has been given earlier. The process of ECHS patients is a bit different and is given as under

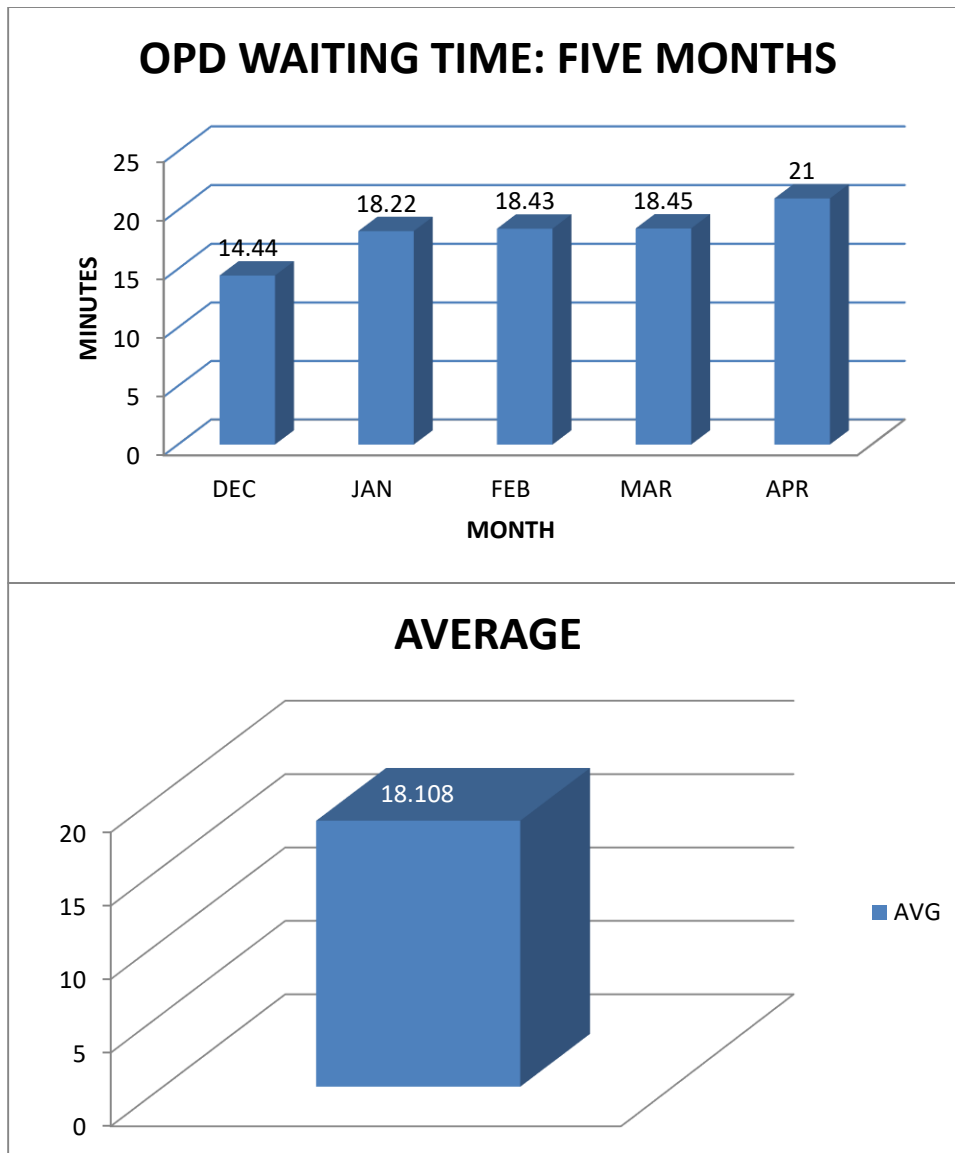




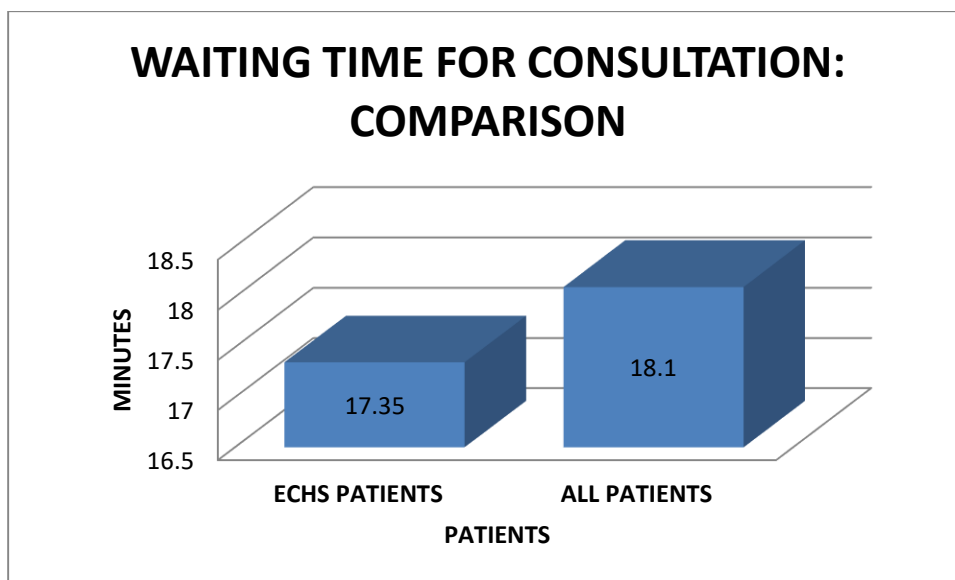
Carries out tests / coordinates
appointment for tests



Waiting Time for OPD Patients: Hospital Data— the waiting time for all OPD patients as per data obtained by hospital is as under

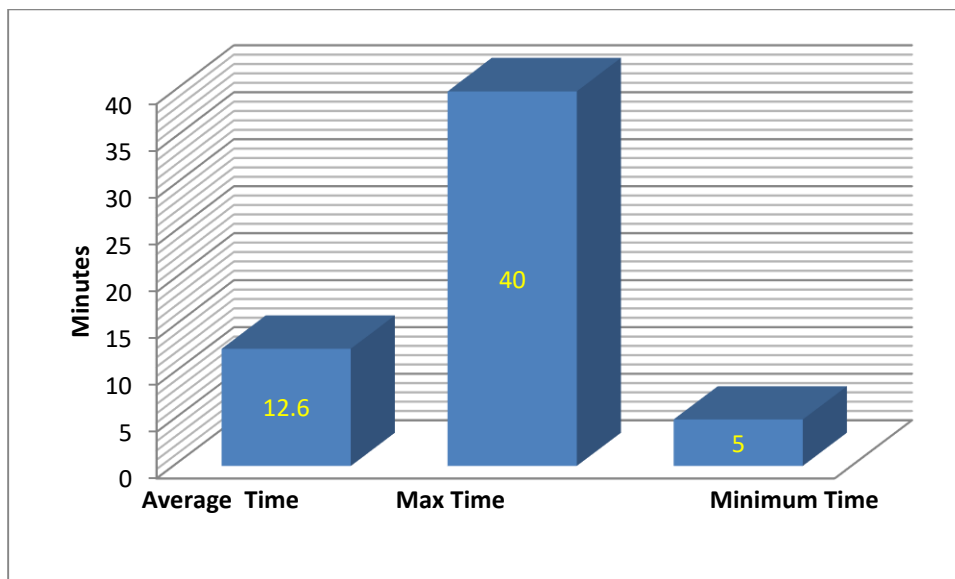


Waiting Time for Consultation for OPD Patients: ECHS Based on the study carried out the waiting time for ECHS patients was observed. First overall waiting time of ECHS patients as observed during the period of study is calculated. This is as per the definition of waiting time by the Hospital ie only taking the time taken by the patient after registration/opening of his visit and till the time he/she enters the doctors chamber. The waiting time in queue for registration is not taken into account. The average value is 17.35 minutes, which is marginally lower then average waiting time of consultation for all patients for past five months, which as shown earlier is 18.106 minutes. However, it is higher than the benchmark of 15 minutes. Comparative chart is as under:-



Waiting Time In Queue For OPD ECHS Patients The waiting time in queue for the OPD ECHS patients was carried out. This facet is extremely important to find out how much time a patient is spending in the reception counter in order to carry out his registration, open his visit, carry out the documentation formalities etc. It was found that on an average a patient spends 12.6 minutes in the reception/ECHS counter. During peak time this increases to 40 minutes and during non rush hours it may take 5 minutes.

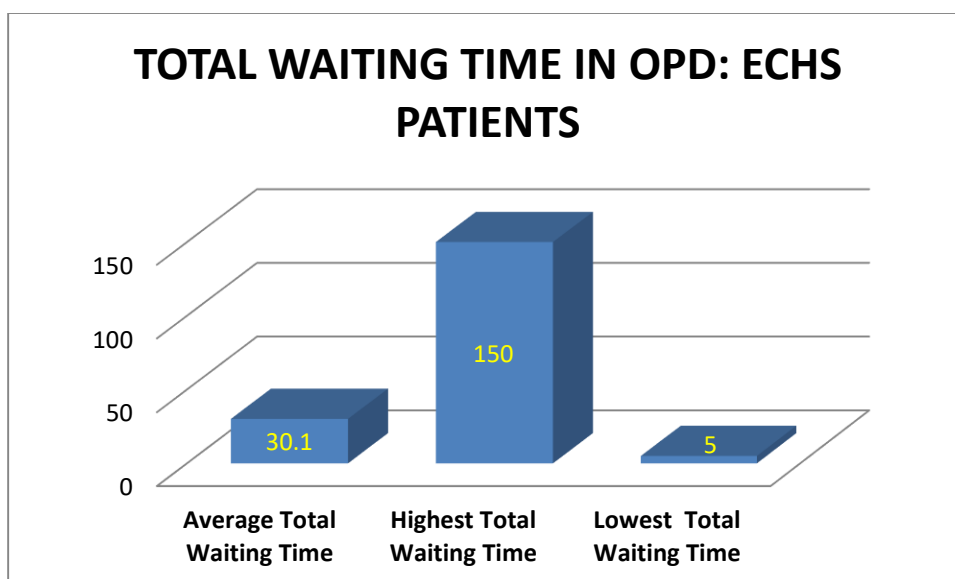
TIME SPENT BY PATIENTS IN RECEPTION/ECHS COUNTER



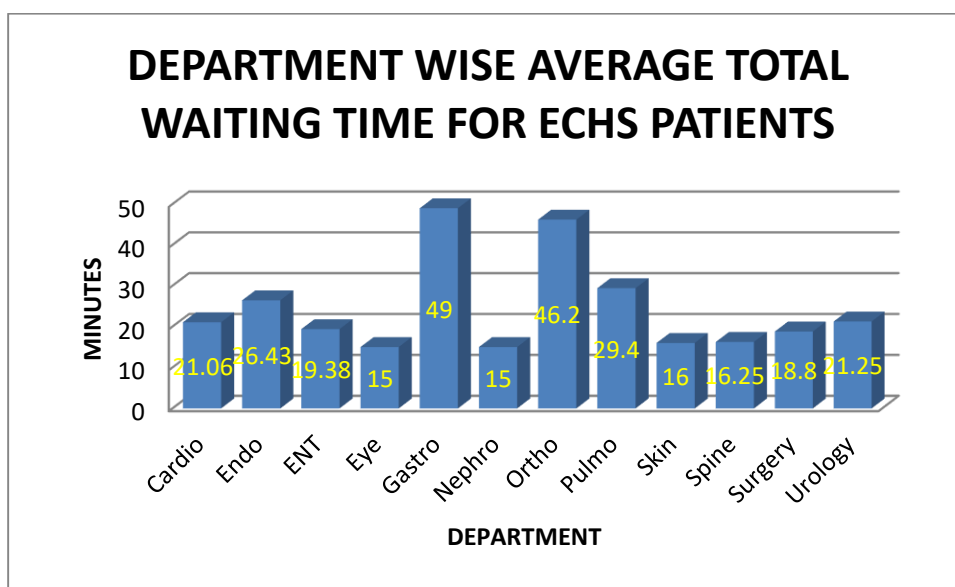
Total Waiting Time in Queue for OPD ECHS Patients However, it is felt that the concept of the total waiting time is much more appropriate in analyzing the time spent by the patient prior to commencement of consultancy by the Doctor. It comprises of both the time spent by the patient in the reception counter as well as waiting time for consultancy in respective OPDs. A patient gauges effectiveness of any hospital by the time he spends prior to consultancy to commence. So it is strongly felt that both times are equally vital. Therefore

Total Waiting Time = Total time spent in reception/ECHS counter + Waiting time in OPDs prior to commencement of consultancy.

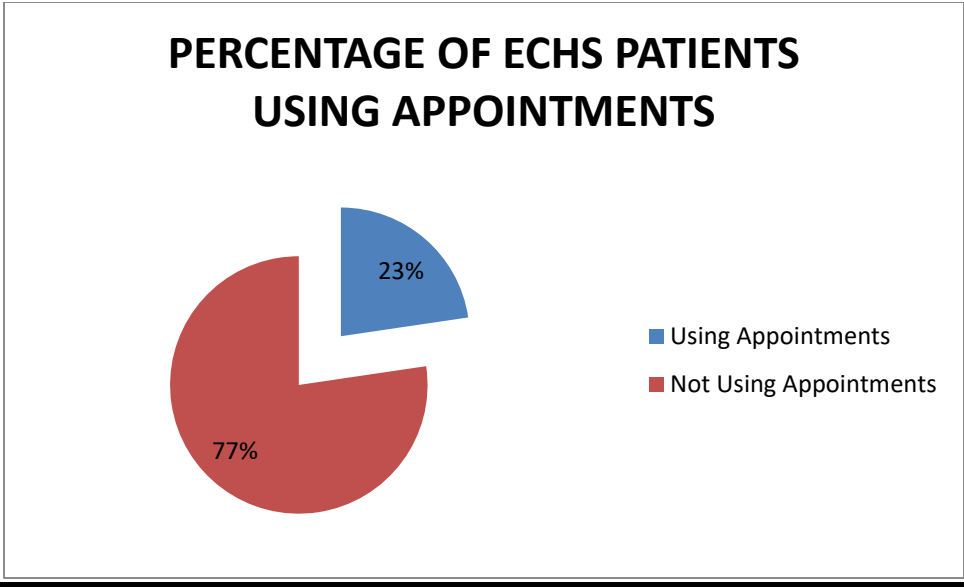
It is seen from the study that on an average an ECHS patient spends 30.10 minutes on an average in the hospital prior to commencement of consultancy by the Doctor!! This varied from a high of 150 minutes to as fast as 5 minutes. The graph is as under



7. **Department wise Analysis-** A graphical Analysis of Average Total waiting time according to various OPD departments is given below. Its seen that the highest average total waiting time is 49 minutes for Gastroenterologist and lowest is 15 minutes for Eye and Nephrologists.

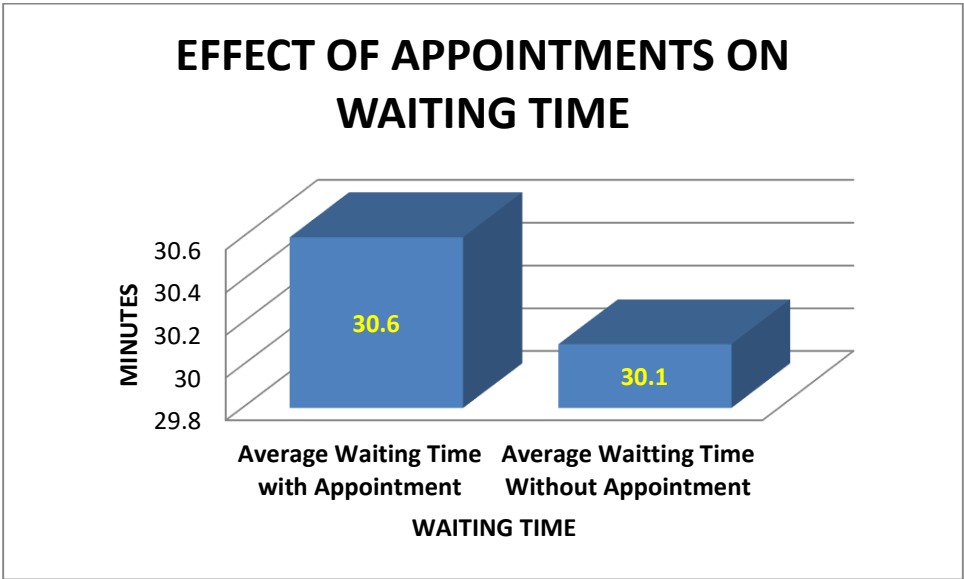


8. **Association Between Total waiting Time and Prior Appointments-** There is a provision in the Hospital wherein patients make appointments to consult a specialist. This can be done either through telephone manned by the operator in console or through a recently developed App which can be downloaded on mobile phones. As per data collected it is seen that



It is also noted that all these 23 percent patients who used appointments did so using tele booking. **No patient was found using the App.**

Association Between Appointment And Waiting Time. It is seen that making prior appointments does not result in decrease of the total waiting time for the ECHS patients. In fact, making prior appointments results in marginal increase. This needs to be addressed by the authorities. The details are depicted below-;

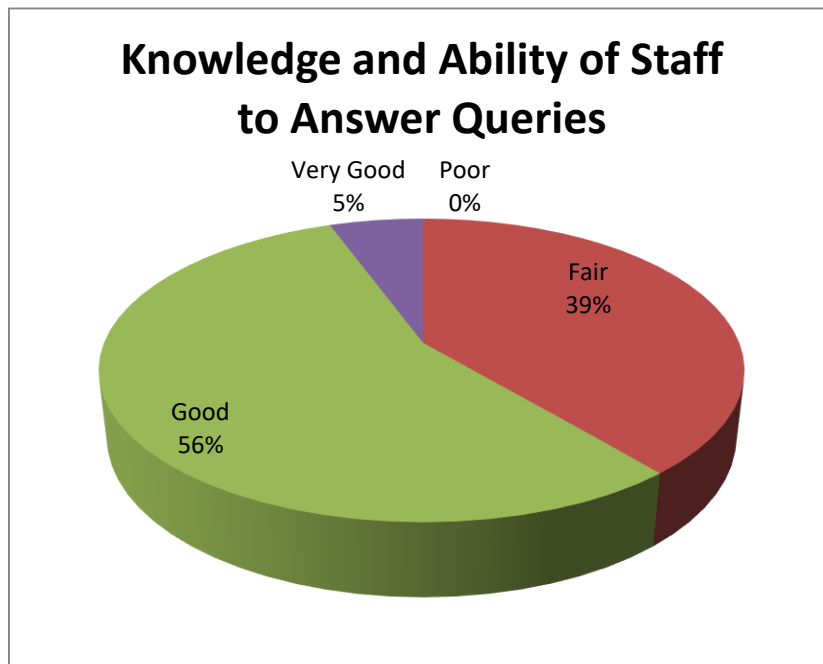


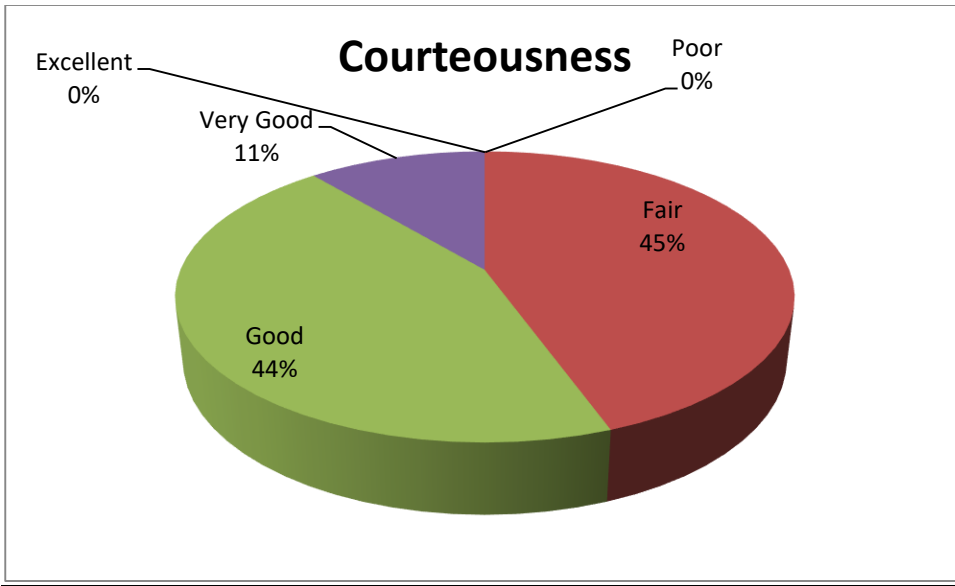
B) OPD SURVEY-

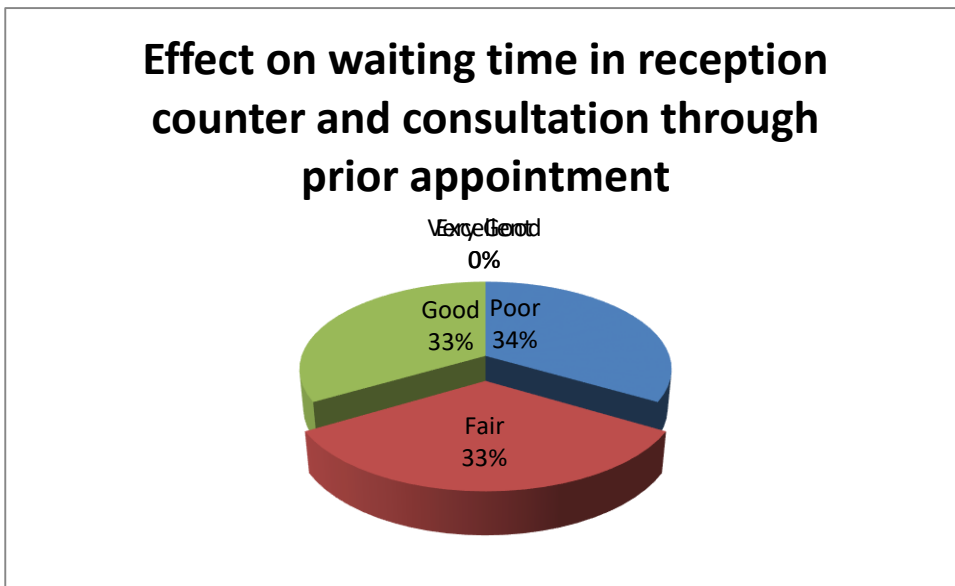
- A sample of 50 ECHS patients were selected for data collection from OP department. All the respondents were taken from the patient who visited the MI Room for the first time as well as follow up patients. The patients were randomly selected and structured interview taken with the help of questionnaire prepared. It is highlighted that this was approved by the concerned authorities in the Hospital.
- Sample represents the whole population.

The data is collected in a format in Annexure I.

Appointment:- The patients were generally satisfied by the process of Appointments implemented. However, factors like ease to book appointments and waiting time to speak to operator on telephone needs to be looked into.

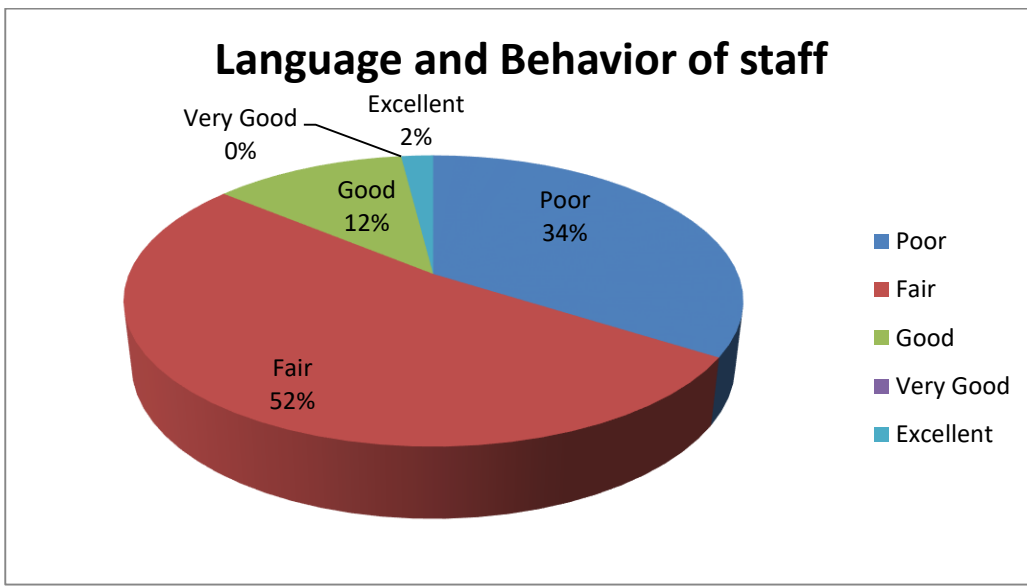


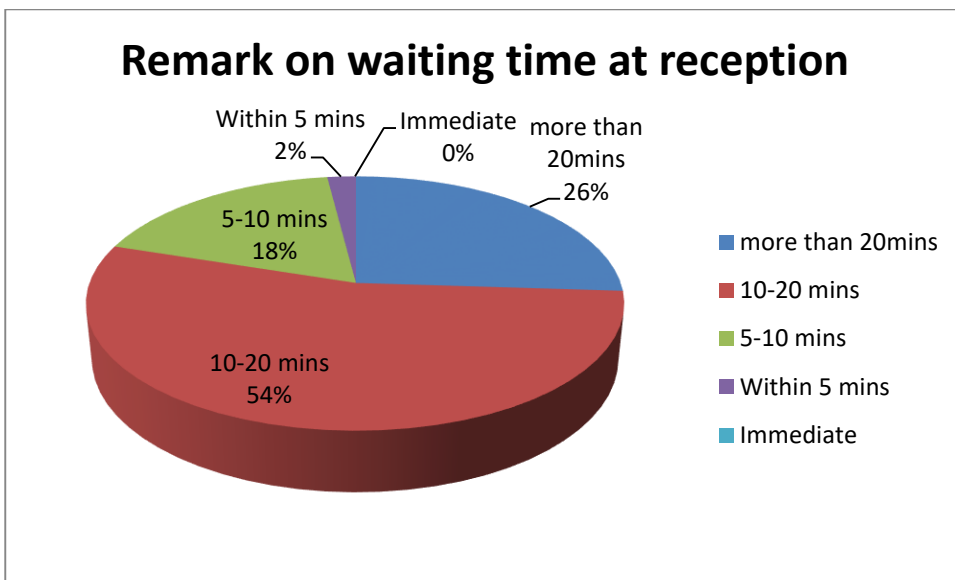
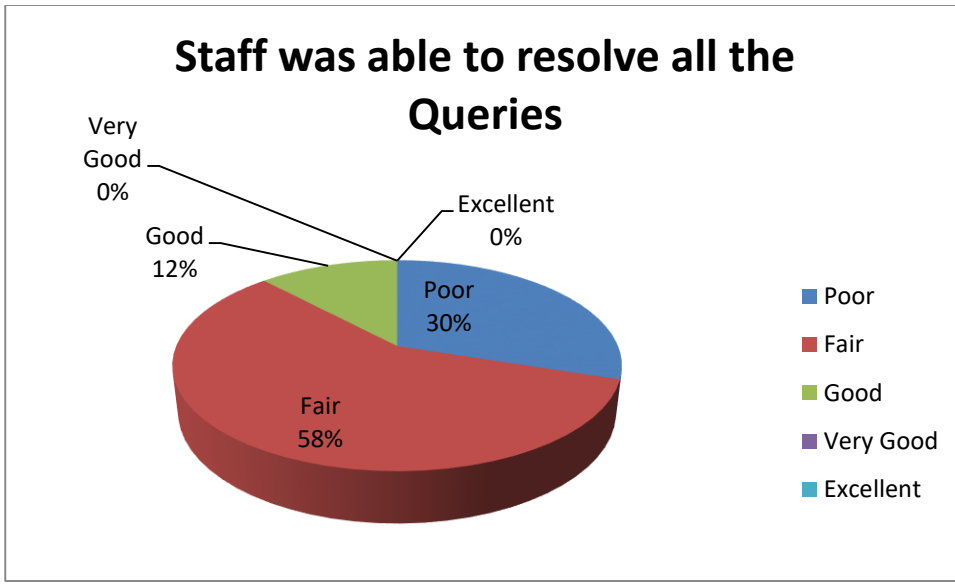




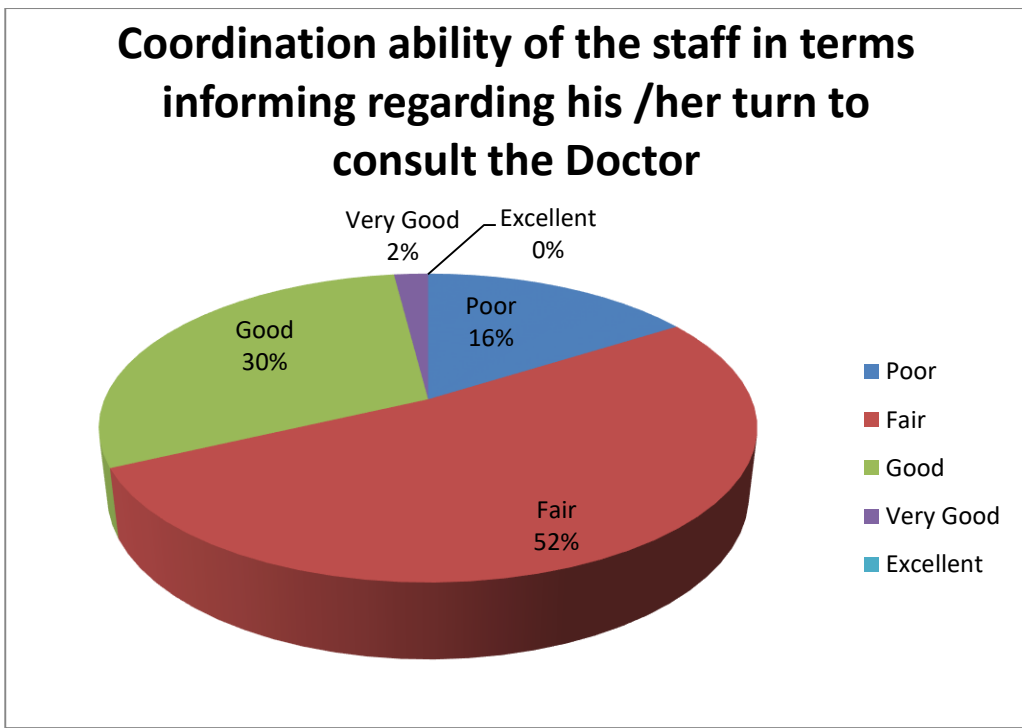
Reception The respondents were generally critical about the behaviour of the staff manning the ECHS counter as also regarding his capability of answering queries. Actually, there are two staff members who generally attend to the ECHS patients. One of them mans the counter specifically meant for the ECHS patients during peak time ie 10 AM to 12 PM. The other staff member looks after the ECHS IPD cases and sits in the back office.

During off peak hours, the special counter of ECHS is non functional and any normal counter in the reception looks after the ECHS patients too. The hospital needs to address the issue of enhancing the soft skills of the concerned staff as also train all the staff members on the ECHS functioning and policies.

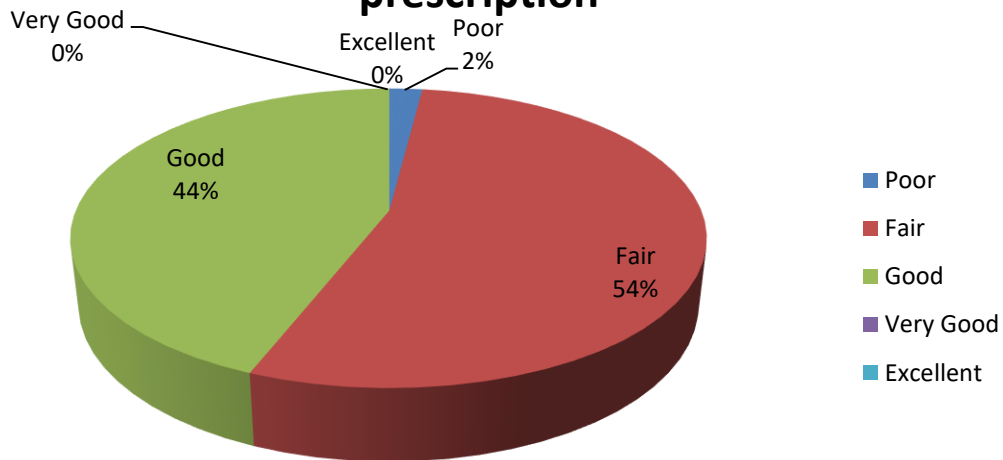




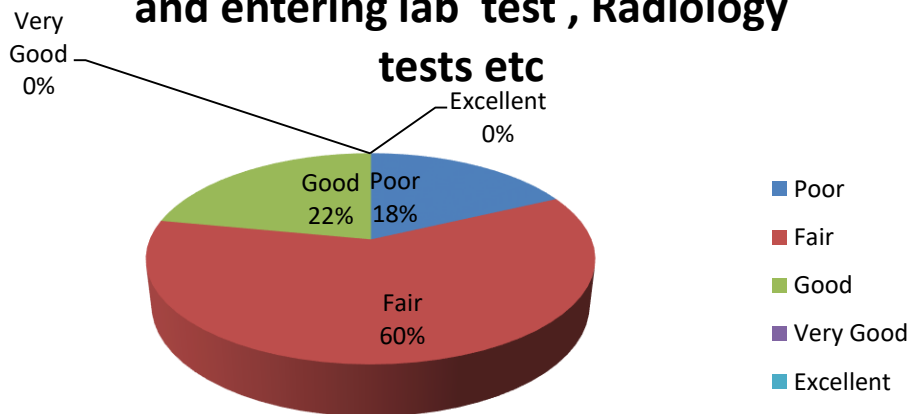
OPD The OPD feedback was generally appropriate. However, proper streamlining of patients in consulting Doctors needs to be focused on. Also providing guidance to the patients in carrying out investigations, as prescribed by the Doctor needs to be looked into.

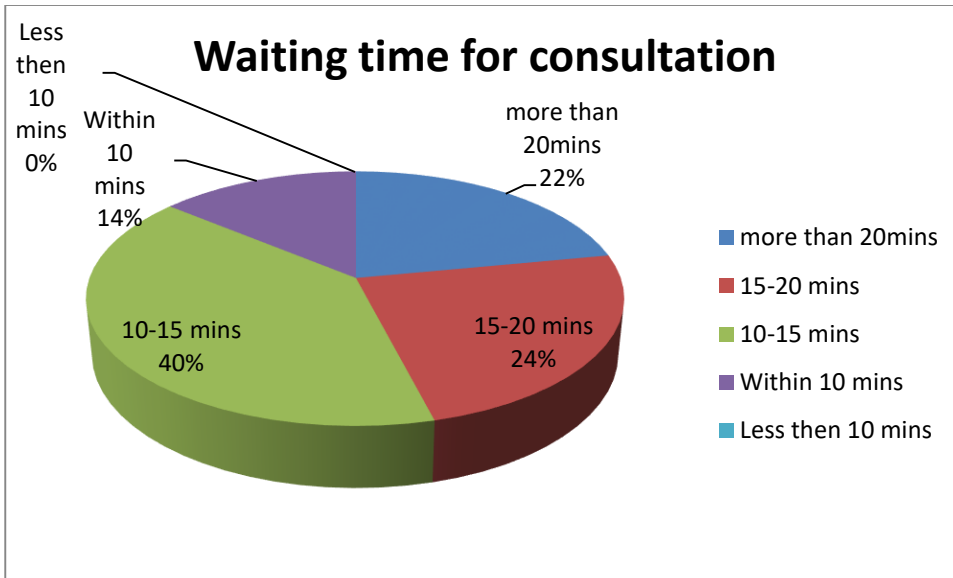


Prompt handing over of Doctors prescription

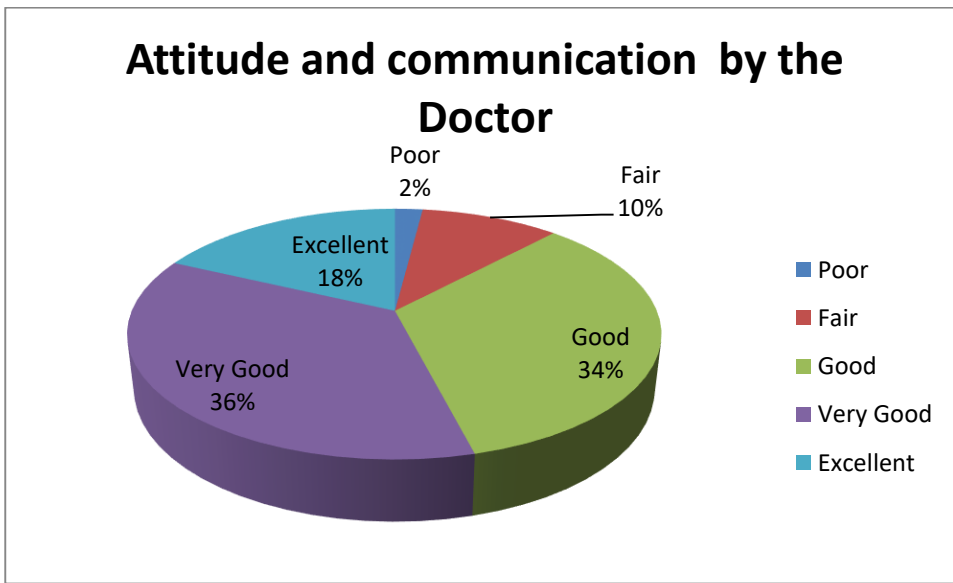


Promptness in guidance, booking and entering lab test , Radiology tests etc

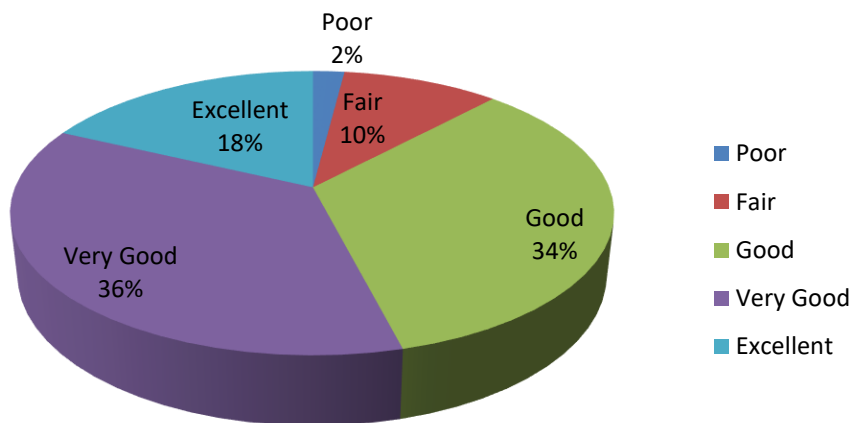




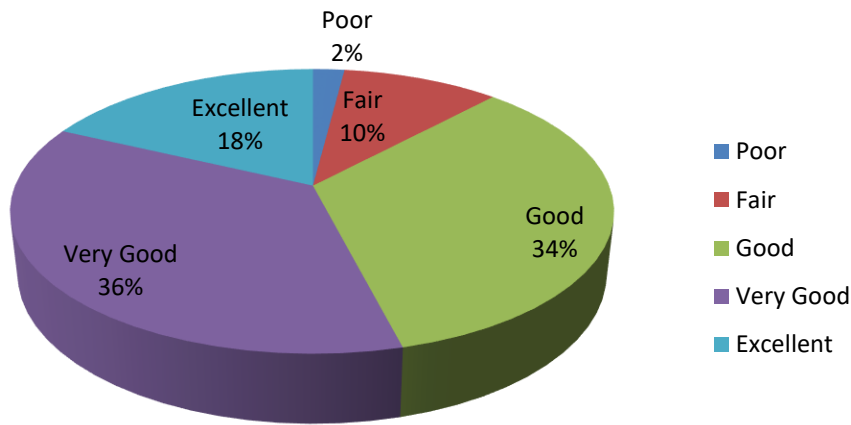
Consultation By Doctors The Patients generally gave a thumbs up to the way the Doctors handled the Patients. Details are as under:-



Proper explanation of the disease

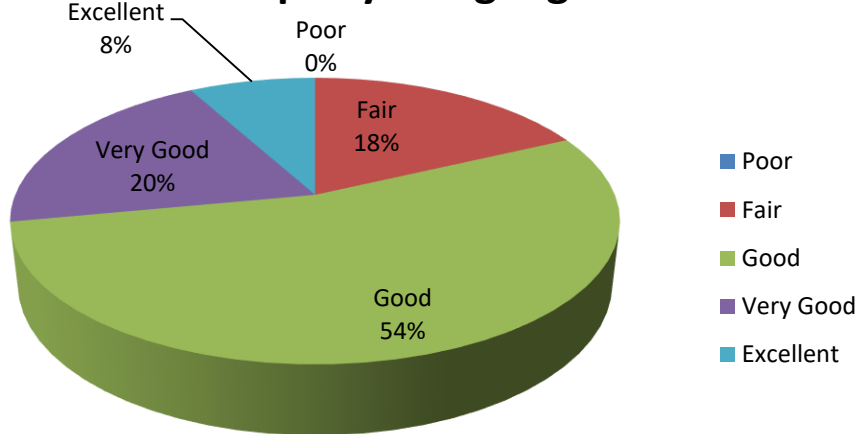


Proper explanation of the treatment

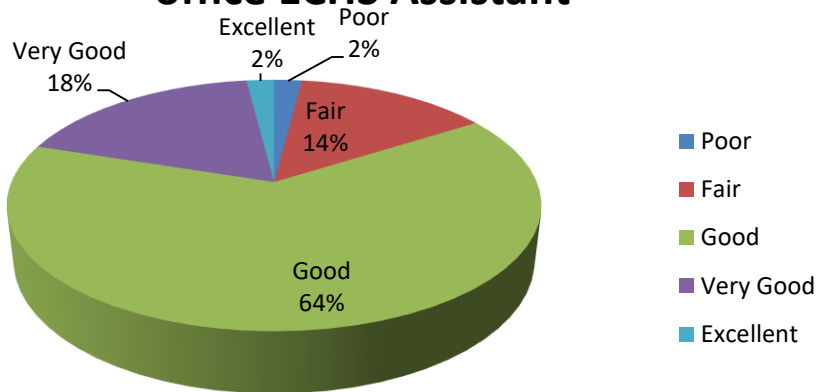


Other Aspects The Patients were generally well satisfied as far as physical infrastructure of the hospital and other parameters under this head. The details are as under:-

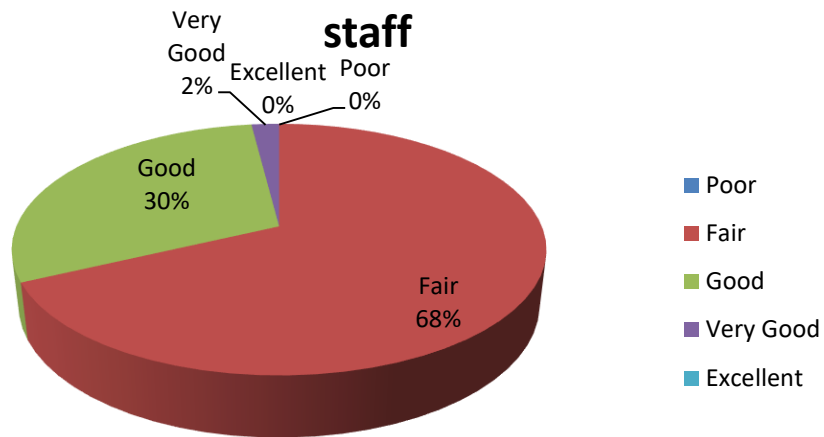
Adequacy of signage's



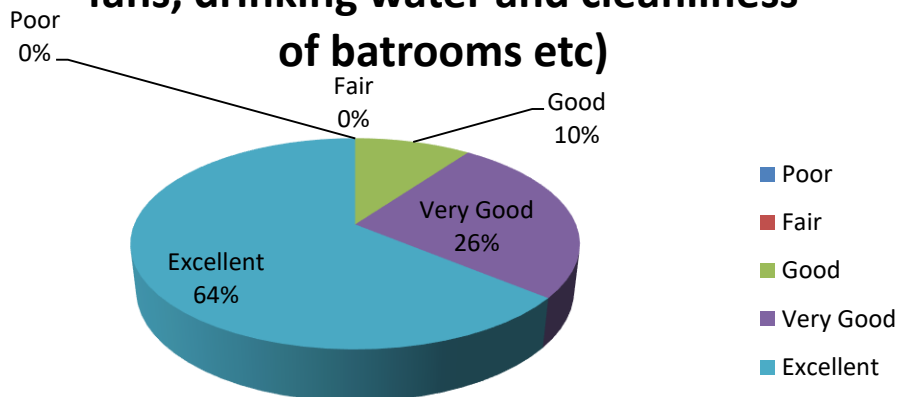
Ability of answering queries by back office ECHS Assistant



Overall behavior of staff

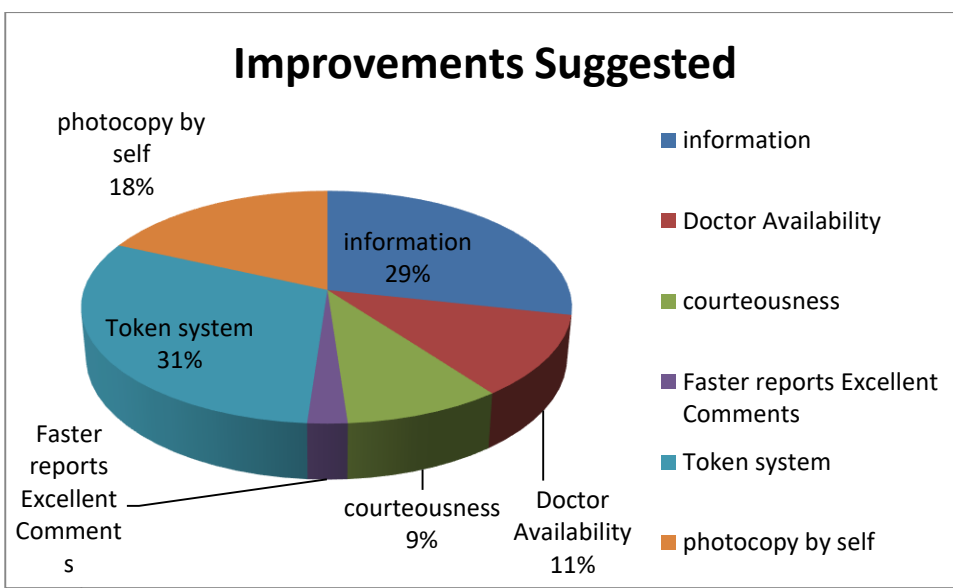


Amenities in waiting area (chairs, fans, drinking water and cleanliness of batrooms etc)

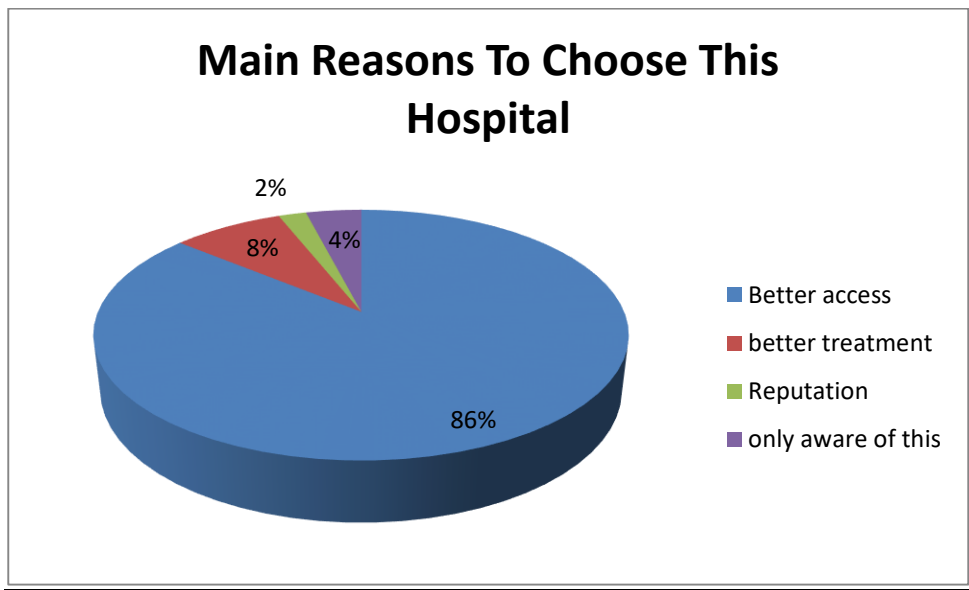




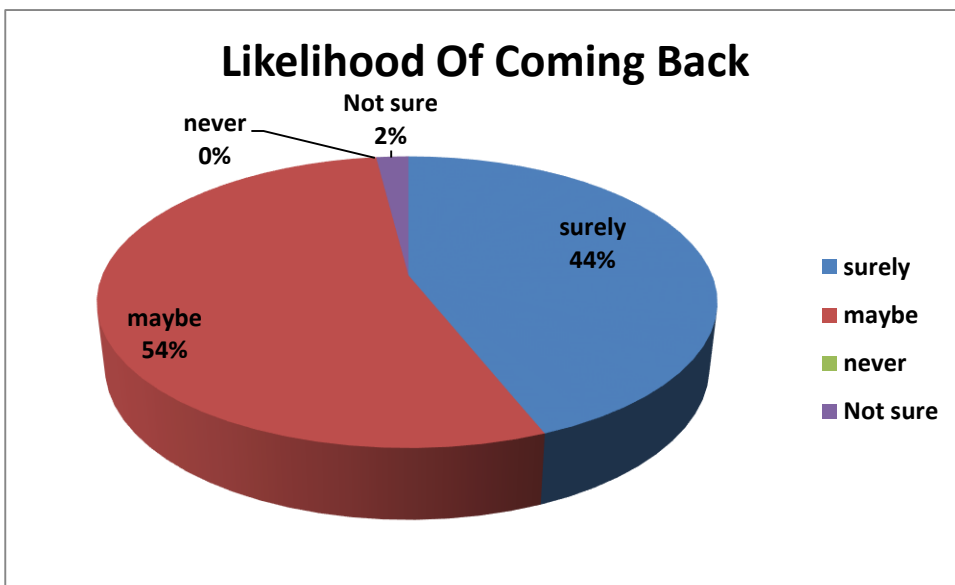
Improvements Suggested By The Patients The Patients were forthcoming in suggesting improvements which can be carried out, both procedurally and administratively. It is recommended that the hierarchy of the hospital adequately implements the suggestions, if possible. This will lead to Patient satisfaction and decrease in waiting time. Particularly the suggestions of getting the photocopy of referral documents by the patients themselves and token system in OPD need to deliberate.



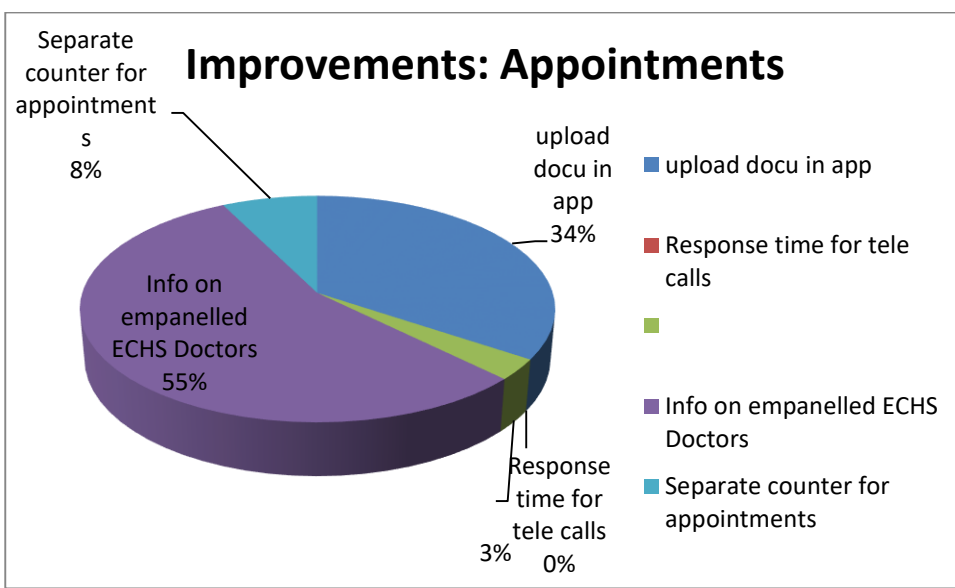
Main Reasons To Come Back To Hospital Most ECHS patients come to this hospital due to better access. Details are



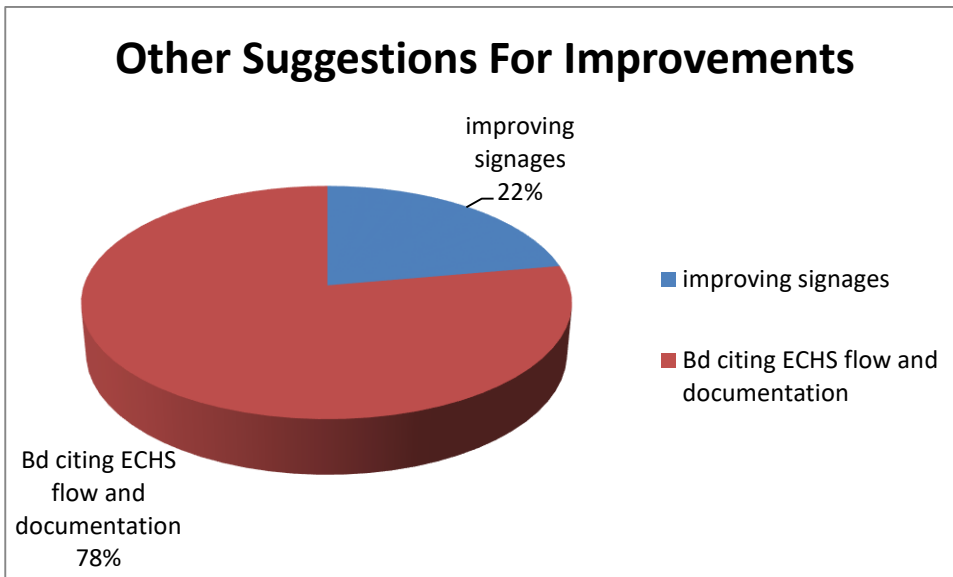
Likelihood Of Coming Back Most Patients would like to come to the hospital, mostly due to its geographic location. Details are:-



Suggested Improvements in Appointments The Patients gave some concrete suggestions for improving the appointment system for ECHS patients. Particularly the suggestion regarding feasibility of uploading referral documents vis the App needs to be looked into. This will surely result in less waiting time in the ECHS counter.



Other Suggested Improvements Some other suggestions for improvement highlighted by the Patients are given below. The recommendation to install a information board or a Kiosk highlighting flow, documentary and other important information needs to be looked into



INFERENCES

REASONS BEHIND LONG WAITING TIME IN OPD FOR ECHS PATIENTS

Most of the patients are walking patients who are not aware of appointments facility both by tele and through app.

The App does not have the capability to upload requisite supporting documents as required by the hospital.

Doctors sometimes are late or have to attend patients in emergency department and IPD due to which they have to leave OPD area in between.

Some Doctors either do not see the ECHS patients or have earmarked a ceiling as regards the No of ECHS patients they will see per day. In addition, some Doctors have earmarked only some days in a week when they will see these patients. The patients are not aware of this and it results in either increase in waiting time or patients have to go back and come accordingly.

There is only one counter established for ECHS patients during peak time. So for around 30 % patients, there is only one counter while for balance 70 percent there are 3 to 4 counters. This creates avoidable bottlenecks. During non peak time normal counters are used for ECHS patients, resulting better utilisation of resources.

Substantial time is taken in the counter to carry out Photostat of requisite referral documents. Requisite No scanners are also not present particularly in normal counters. Time is wasted in carrying out the Photostat.

There is no token system to regulate the flow of patients to respective Doctors in the OPD station. This causes a bit of confusion in the patients particularly during peak hours.

RECOMMENDATIONS-

A) For reducing Waiting Time

- Timings for IPD round should be clearly defined which would gradually result in reduced waiting time for OPD patients.
- Patients should be well informed about their turn for consultation so that they will be present when their names are announced. Token system needs to be incorporated as a test case.
- The feasibility of doing away with special ECHS counter and instead utilising this counter for all patients and changing its location to reception area from OPD 2 needs to be studied in detail. However, this will entail training of all staff in reception on ECHS procedures.
- Appropriate scanners must be provided so that time is not wasted. In addition, patients can be educated to get Photostat documents.

B) For enhancing Patient Satisfaction

- Staff needs to be trained in soft skills and ECHS procedures.
- Technology must be leveraged. The present APP can be modified to accept copies of referral documents in appointment menu. Balance process can be coordinated and this will result both in reducing waiting time for patients as well as employees time.
- The list of empanelled Doctors for ECHS and their timings must be clear and known to both the patients and employees of customer care department. This will ensure a better flow.
- Focus on educating ECHS patients on carrying out appointment and usage of the App, after due amendments.

LIMITATIONS OF THE STUDY

- **The study was concerned with only outpatient department.**
- **Sample size may be insufficient.**
- **Study was done for short duration.**
- **The untimely,unforeseen epidemic had its own share of varied experiences.**

LITERATURE REVIEW

SivalenkaSrilata(2000) in a patient satisfaction survey can help to show patients that a healthcare organization is interested in quality and in making improvements. It demonstrates an organization's commitment to its patients.

In a study conducted by the PGIMER (2011), it was found that average time spent by respondents for registration was 33.20 minutes. The overall satisfaction regarding the doctor-patient professional and behavioral communication was more than 80 per cent at almost all the levels of health care facilities. In total, 55 per cent of respondents opined that doctors have shown little interest to listen to their problem while 2/3 opined that doctors used medical and technical terms to explain their illness and its consequences

Joshi (2013) patient satisfaction is deemed to be one of the important factors which determine the success of health care facility. The real challenge is not getting ready with mere requirements, but also delivers services ensuring good quality. Thus, there is a need to assess the health care systems regarding patient satisfaction as often as possible.

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Annexure I

FORMAT:SATISFACTION SURVEY OF ECHS OPD PATIENTS

New ☐

Repeat ☐

Please tick the appropriate box

Sl No	Attributes	Poor 1	Fair 2	Good 3	Very Good 4	Excellent 5	comments
1	<u>APPOINTMENT</u> Knowledge and ability of staff to answer queries						
2	Courteousness						
3	Ease to book appointment						
4	Waiting time to speak to staff						
5	Hospital App feedback						
	Effect on waiting time in reception counter and consultation through prior appointment						

6							
	<u>RECEPTION AND REGISTRATION</u>						
7	Language and Behavior of staff						
8	Staff was able to resolve all the Queries						
9	Remark on waiting time at reception	more than 20 mins	10-20 mins	5-10 mins	Within 5 mins	Immediate	
	<u>OPD STATION</u>						
10	Behavior of the staff						
11	Coordination ability of the staff in terms informing regarding his /her turn to consult the Doctor						
12	Waiting time for consultation	more than 20 mins	15-20 mins	10-15 mins	Within 10 mins	Less then 10 mins	
13	Prompt handing over of Doctors prescription						
14	Promptness in guidance, booking and entering lab test , Radiology tests etc						
15	<u>CONSULTATION</u>						

	Attitude and communication by the Doctor						
16	Proper explanation of the disease						
17	Proper explanation of the treatment						
	<u>OTHER ASPECTS</u>						
18	Adequacy of signage's						
19	Ability of answering queries by back office ECHS Assistant						
20	Overall behavior of staff						
21	Amenities in waiting area (chairs, fans, drinking water and cleanliness of bathrooms & toilets)						
22	Your overall satisfaction during the visit to the hospital						

1. What improvement would you like to see in the hospital?

- ☐ Information
- ☐ Doctors availability
- ☐ courteousness
- ☐ Faster Reports
- ☐ Token system
- ☐ Photocopy by self

2. What made you come to this hospital for treatment?

- ☐ Better Access
- ☐ Better Treatment
- ☐ Reputation
- ☐ Only aware of this

3. Would you like to return to this hospital next time for treatment?

- ☐ Surely
- ☐ Maybe

- Never
- Not sure

4. Any suggestion for appointment booking through telephone or app?

- Uploading of Documents in App
- Response Time for Tele calls
- Info on empanelled ECHS Doctors
- Separate counter for Appointment

5. Any other valuable suggestions

Signage's

Display Bd citing ECHS flow and documentation requirements

Date _____ MRN _____ Name _____

Age _____ Sex _____