



Efficacy of postpartum patient care delivery in a public tertiary care hospital of North India: Patient's Perspective

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Abstract

Objective: To evaluate postpartum patient's perspective on care delivery system in a tertiary public hospital of north India via questionnaire.

Methodology: This hospital based survey via questionnaire derived from Hospital Consumer Assessment of Health care Provider and System survey [HCAHPS], relevant to our scenario, was conducted in post-natal ward, Department of Obstetrics and Gynaecology of a tertiary care centre in Central Delhi from January to August, 2017. Patients were asked about their experience regarding the levels of care received via selfmade questionnaire. The results were calculated from this data thereafter.

Results: 49% of patient required less than half an hour time to get admitted. Around 14% patients had great difficulty in locating wards. 98% patients in our hospital were accompanied by three relatives and 2% are accompanied by two relatives. Around 73% and 74% patients in our study were dissatisfied with behaviour of Doctors and nurses towards them. 23% patients were highly satisfied with ward cleanliness, whereas, 16 % found the wards quite dirty. 35% patients found the toilet conditions unsatisfactory. 84% patients were not satisfied with the diet provided in hospitals. Overall, 10.87% patients were completely dissatisfied with level of care given in our hospital and only 8% patients were completely satisfied.

Conclusion: Lots of efforts are required to improve the patient care delivery and building good rapport with the patients.

Keywords: Patient care, hospital based, post natal ward

Introduction

Patient centred care involves respectful care, with involvement of family for emotional support, providing necessary information, and helping them in transition from sick to recovered ^[1]. The patient centred care had 8 components as given by Picker institute and Harvard Medical school in 1987 ^[2]. The eight principles of Picker includes patient's preferences, information and education, access to care with coordination, providing emotional support and physical comfort, involvement of family and friends and helping in continuity and transition ^[2].

The hospital consumer assessment of health care provider and system survey (HCAHPS) reflect patient perception of care. Patient perspective were measured through their responses to 21 factors which were organise into 9 areas as communication with Doctor's, communication with nurses, responsiveness of hospital staff, responsiveness of hospital staff, pain management, communication about medicines, discharge information, cleanliness, quietness in the hospital environment and transition of care ^[3]. With Picker principles in mind and HCAHPS response factor we are evaluating the patient centred care in our hospital

and suggesting the improvements for same.

Methods

The study regarding patient centred care and patient satisfaction was conducted via questionnaires amongst 100 patients and relatives in the post natal ward of a tertiary care centre in Central Delhi from January to August, 2017. The questionnaire was regarding process of admission, behaviour of doctors, nurses and orderlies, ward cleanliness, toilet hygiene, diet and overall assessment. The behaviour of doctors, nurses and orderlies were analysed on 5- point Likert scale including: 1= strongly agree, upto 5= strongly disagree. Patient were also asked regarding the improvement they want and new suggestions for patient care. The results were calculated using SPSS 20 software.

Results

Response to 9 factors as per HCAHPS in post natal ward was modified according to relevance in our hospital and our experience of hardship faced by patients.

Table 1: Satisfaction with admission services

	<30 min	30 min-1 hour	1-1.5 hour	1.5-2 hour	>2 hours
Admission Process	49	40	5	5	1
Finding wards	8	50	16	12	14

Table 2: Behaviour of staff in hospital toward patient

Response	Doctor's behaviour	Nurses behaviour	Class IV employee and helping staff of wards
Excellent	10	6	30
Good	30	32	41
Average	44	43	25
Unsatisfactory	1	11	4
Poor	15	8	0

Table 3: Diet and Hygiene

Response	Diet	Cleanliness of wards	Toilet hygiene
Excellent	0	1	16
Good	16	22	44
Average	56	62	35
Unsatisfactory	28	16	5
Poor	0	0	0

About 49% patient in our study got admitted in less than half hour and around 40% require upto 1hour. Around 58% patient in our study found their ward with ease, while 14% patients had great difficulty in locating the wards.

Only 10% patient in our study found behaviour of doctors excellent, 30% considered good, 44% found it average, and 15% found it poor. Some found doctors unresponsive and indifferent. Around 6% patient in our patient found behaviour of nursing staff excellent, 32% found good, 43% average and around 11% unsatisfactory. 30% of patient found class IV and helping staff of ward are working excellent, 41% found good and 25% average. About 22% patient in our study found wards were clean upto the mark, whereas 62% found it quite average.

Nearly 16% felt toilet hygiene excellent, 44% found good, 35% average and 5% unsatisfactory. About 16% patient in our study found diet was good, 56% found it average and nearly 28% found it unsatisfactory. Considering overall assessment 10% of patient found it great, 40% considered it good, 35% average, for 9% it was unsatisfactory and 6% found it poor.

Discussion

We reviewed the currently available literature to improve our understanding of patient centred care. The result of our study were similar to study done by Mishra *et al*, where 82% were satisfied with admission services as 89% patient in our study [4]. With respect to behaviour of doctor's, nurses and orderlies, the patient satisfaction rate were 40%, 38% and 71% respectively. Our results were not in accordance with the study done by Mishra *et al*. [4] who found the patient satisfaction rate of 90%, 90%, and 80% for doctors, nurses and orderlies.

If we report our results in terms of satisfactory and unsatisfactory than in terms of diet, ward cleanliness, toilet hygiene, doctors and nurses behaviour, that in our study around 72% were satisfied with diet, 85% and 95% were satisfied with ward cleanliness and

toilet hygiene, 84% and 81% were satisfied with behaviour of doctors and nurses.

The result of our study were similar to study done by Seetesh Ghosh and Vivek Adish, they also reported patient satisfaction in terms of diet, ward cleanliness, toilet, doctors and nurses behaviour as 96.7% in terms of diet, 70.4% and 84.9% for ward and toilet cleanliness, 98.7% were satisfied with nurses behaviour and >95 % patients were satisfied with doctor behaviour [5].

The results of our study in terms of time required for admission i.e. 49% were admitted in less than 30 minutes while 40% require upto 1 hour. These results were similar to the study done by Shantala B. Bhole *et al*, they reported 64% were admitted in 30 minutes and 20% took 1 hour [6]. The above studies are from private hospitals where overall assessment in terms of patient centred care was very good, indicating better availability of resources .At the same time it increases the cost of health care.

The results of our study in term of cleanliness were concordant with the study done by Prahlad Rai Sodani *et al* who reported patient satisfaction of 71% in terms of cleanliness [7]. With respect to overall satisfaction 10% found it excellent while 40% found it good, the results were non congruent with study done by Anantasios Merkouris *et al*. [1] were in terms of overall satisfaction, 21.6% patient found it very good and 71.3% patient felt good about services [8]. These studies are conducted in tertiary public hospitals.

Recommendations

- Illiteracy was a major contributing factor for this and patient suggested greater use of sign boards to overcome the difficulty.
- There should be special training classes for doctor's for empathetic care.
- Increased workload with decrease in number of nursing staff due to poor recruitment may be a contributory factor. Increase recruitment of nurses to improve nurses to patient ratio to reduce work stress and improvement of patient care.
- Ward should be cleaned 2-3 times and toilets should be cleaned in each shift.
- 2 attendant passes can be considered as single relative cannot handle all things in emergencies.
- The working hours should be reduced so that doctors would work with sound mind and empathy towards patient should not be compromised.

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