

A Study On Patient Level Of Satisfaction With Inpatient Department At Krishna Institute Of Medical Sciences

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Abstract:

Patient satisfaction serves as a pivotal metric for assessing the quality and performance of healthcare services. This study evaluates the satisfaction levels of inpatients at Krishna Institute of Medical Sciences (KIMS), Srikakulam, focusing on key service areas such as clinical care, nursing, dietary services, and hospital infrastructure. A structured questionnaire was administered to 300 inpatients, revealing high satisfaction with doctors' and nurses' services, and moderate satisfaction with housekeeping and dietary services. The findings highlight critical areas for improvement and suggest targeted interventions for enhancing patient experience in tertiary care hospitals.

Keywords: Patient satisfaction, healthcare quality, inpatient services, tertiary hospital, KIMS, service assessment

1. Introduction

The healthcare industry increasingly recognizes patient satisfaction as an integral measure of service quality. In India, the rise in public and private healthcare options has intensified competition, urging hospitals to focus on service excellence. Patient satisfaction reflects the degree to which healthcare services meet or exceed expectations, influencing health outcomes, loyalty, and hospital reputation.

This study was conducted at Krishna Institute of Medical Sciences (KIMS) a multispecialty tertiary care facility. The aim was to assess inpatient satisfaction and identify service areas needing improvement for better patient-centered care.

2. Methodology

A hospital-based cross-sectional study was conducted using a structured questionnaire. The sample included 300 inpatients who had stayed for over 48 hours across various departments such as General Surgery, Medicine, Obstetrics & Gynecology, and Orthopedics.

Inclusion Criteria: Patients aged above 10 years, admitted for >48 hours, and conscious at the time of the interview.

Exclusion Criteria: ICU patients, pediatric patients without guardians, laboring mothers.

The questionnaire included 20 items across three dimensions:

- Service Utilization
- Patient-Healthcare Provider Interaction
- Facility-Related Services

Responses were recorded on a 5-point Likert scale (1 = Not Satisfied, 5 = Very Satisfied).

3. Results

Demographics:

- Age group 31–40 formed the largest cohort (23.3%)
- Male to female ratio: 59.6% to 40.3%

Department-Wise Distribution:

- General Surgery wards (pre and post-operative) accounted for over 41% of admissions.
- Majority were covered under Arogyasree (72%).

Key Findings:

- **Doctor's care and communication** received the highest satisfaction (98% marked Excellent or Good).
- **Nursing services** were also highly rated for attentiveness and timely medication.
- **Dietary services** and **lift operations** scored lower, indicating dissatisfaction with food quality and vertical patient movement.
- **Overall satisfaction:** 92% of patients rated the hospital services as Good or Excellent.

4. Discussion

The results emphasize strong clinical care and staff-patient communication as critical drivers of patient satisfaction. High ratings for doctors and nurses underscore the impact of interpersonal care. However, aspects such as dietary service, information dissemination, and facility support (e.g., lifts and security guidance) require improvement.

These findings align with similar studies conducted in tertiary hospitals in India and abroad. Studies by Verma et al. and Kulkarni et al. also noted high satisfaction with medical staff but moderate concerns regarding non-clinical services. Regular monitoring of patient feedback, staff training, and facility upgrades can address these gaps, contributing to a more holistic patient-centered approach.

The findings of this study underscore the crucial role of clinical care—particularly doctor-patient and nurse-patient interactions—in shaping overall patient satisfaction. The high ratings in these areas indicate that the hospital has established a strong clinical foundation, where effective communication, empathy, and timely medical interventions are consistently delivered. These results affirm previous studies, such as those by Verma et al. (2020) and Kulkarni et al. (2011), which also reported high levels of satisfaction with medical personnel in tertiary care hospitals across India.

However, patient satisfaction is a multi-dimensional construct, and excellence in clinical services alone does not guarantee a wholly positive patient experience. Moderate satisfaction levels with support services such as dietary provision and housekeeping, and lower scores for operational infrastructure like elevator (lift) services, reveal critical service delivery gaps. Dissatisfaction in these areas may not directly affect clinical outcomes but can influence patient perceptions, recovery experiences, and willingness to return or recommend the facility.

For example, patients rated the quality, variety, and timing of meals as below expectations. Inadequate nutrition or poorly managed meal schedules can contribute to patient discomfort and dissatisfaction, particularly for those with specific dietary requirements. Similarly, delays in vertical movement due to elevator issues—especially for post-operative and elderly patients—can hinder timely care and negatively affect satisfaction.

These findings suggest a need for a more integrated, patient-centered approach to hospital management, wherein non-clinical services are given equal importance in the overall care model. Periodic training for dietary and housekeeping staff, investment in infrastructure maintenance, and the implementation of a real-time service feedback mechanism can help address these concerns.

Furthermore, the demographic data offer additional layers for interpretation. The predominance of patients under government health schemes such as Arogyasree indicates the critical role public insurance programs play in hospital

utilization. This raises the need for equitable service quality regardless of a patient's financial coverage source. Hospitals must ensure that subsidized treatment does not translate into compromised service delivery, especially in ancillary areas. The high overall satisfaction rate of 92% is encouraging but also highlights the challenge of maintaining this standard amid rising patient volumes, resource constraints, and evolving expectations. Adopting a Continuous Quality Improvement (CQI) framework can help institutionalize service enhancements through regular audits, patient feedback analysis, and responsive managerial action.

Lastly, while this study offers valuable insights, future research could explore satisfaction trends across different socioeconomic strata, evaluate staff responsiveness in emergencies, and examine how organizational culture affects service delivery. Incorporating qualitative interviews or focus group discussions could also help uncover patient expectations in greater depth.

5. Conclusion

This study confirms that patient satisfaction in tertiary hospitals like KIMS depends not only on clinical excellence but also on efficient support services. With over 85% of patients expressing satisfaction, the hospital shows promise in healthcare delivery. However, a continuous quality improvement (CQI) model is essential to maintain and elevate care standards, especially in non-clinical departments.

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