

Assessment of Inpatient Satisfaction Across Clinical and Non-Clinical Services in Manipur

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Abstract

Background: Patient satisfaction is a critical indicator of healthcare quality, reflecting the extent to which patients' expectations are met and encompassing clinical effectiveness, service efficiency, and interpersonal interactions. Both clinical and non-clinical aspects of care, including physician and nursing services, hospital infrastructure, communication, emotional support, and comfort, influence patient experiences and outcomes. Evaluating patient satisfaction provides actionable feedback for improving healthcare services and fostering a patient-centred environment. **Objectives:** This study aimed to assess the level of satisfaction among inpatients at a tertiary care teaching hospital, evaluate satisfaction across specific domains including admission procedures, physician and nursing care, comfort, cleanliness, diagnostic and laboratory services, and dietary provisions and identify areas for service improvement. **Materials and Methods:** A cross-sectional survey was conducted at Shija Hospital and Research Institute, Manipur, over four weeks in 2023. A total of 75 inpatients aged 18 years and above, excluding paediatric, critically ill, and short-stay patients, were recruited using convenience sampling. Data were collected through a structured, pre-tested interview schedule using a 5-point Likert scale, with scores ≥ 50 indicating satisfaction. Interviews were conducted by trained personnel under supervision. Data were analysed using descriptive statistics, including mean scores, frequencies, and percentages. Ethical clearance and verbal informed consent were obtained, and confidentiality was maintained. **Findings:** Overall patient satisfaction was high, with a mean score of 103.87 ± 9.64 . Clinical services, including physician and nursing care, received particularly strong ratings for clear explanations, adequate consultation time, and professional behaviour. Administrative processes such as admission procedures and staff helpfulness were also positively rated. Non-clinical services, including comfort, cleanliness, diagnostics, and dietary arrangements, received favourable but slightly variable feedback, with meal quality and certain ward facilities identified as areas for improvement. **Conclusion:** Patient satisfaction at the hospital is multidimensional, influenced by clinical competence, interpersonal interactions, administrative efficiency, and hospital environment. Continuous monitoring and targeted improvements, particularly in non-clinical domains, can further enhance overall service quality, strengthen patient trust, and promote better health outcomes in tertiary care settings. **Keywords:** Patient satisfaction, Tertiary care hospital, Clinical and non-clinical services,

Inpatient experience, Healthcare quality

Introduction

Patient satisfaction has emerged as a vital measure of healthcare quality and is increasingly recognized as a key outcome of medical care. It reflects the extent to which patients' expectations about their care are met and represents a combination of clinical effectiveness, service efficiency, and interpersonal relationships between patients and healthcare providers (Marshall & Hays, 1994). Both clinical and non-clinical aspects of care, including the quality of medical services, hospital infrastructure, communication, emotional support, and physical environment, collectively influence patient satisfaction (Patavegar et al., 2012). The concept of patient satisfaction has evolved over the years from being a peripheral concern to a central indicator of healthcare quality, with patients now considered as consumers in the healthcare marketplace (Johansson et al., 2002). Understanding patient satisfaction is crucial for hospitals and healthcare systems because satisfied patients are more likely to adhere to treatment regimens, continue care, and provide positive referrals, which ultimately contributes to better health outcomes and increased service utilization (Poudel et al., 2020). Patient satisfaction encompasses both subjective perceptions and objective assessments of healthcare delivery. It is influenced by several factors, such as the accessibility and affordability of care, courteous and professional behaviour of doctors and staff, timely provision of services, and the overall comfort and cleanliness of hospital facilities (Kumar et al., 2016; Arshad et al., 2012). In addition, dietary services, laboratory support, and the efficiency of admission procedures also play a significant role in shaping patients' experiences. Assessment of satisfaction provides a mechanism for feedback, continuous quality improvement, and evaluation of service delivery in tertiary care settings.

Shija Hospital and Research Institute, a private tertiary care teaching hospital in Manipur with a bed capacity of 350, serves as a major referral centre in the region. With a growing emphasis on patient-centred care, it becomes imperative to evaluate patient satisfaction levels to understand strengths and gaps in service provision. This study aims to assess the level of satisfaction among inpatients and examine specific domains of care, including admission procedures, physician and nursing services, comfort, cleanliness, diagnostic and laboratory services, and dietary arrangements. By systematically evaluating patient satisfaction, healthcare administrators can identify areas requiring improvement, enhance service quality, and foster a more patient-focused healthcare environment.

Literature Review

Patient satisfaction has been widely studied as an indicator of healthcare quality across diverse settings. Marshall and Hays (1994) highlighted that satisfaction is a multidimensional construct encompassing patients' cognitive and emotional responses to their care experiences. Patavegar et al. (2012) observed that patient satisfaction in tertiary hospitals depends on both medical competence and non-medical services such as communication and administrative efficiency. Johansson et al. (2002) emphasized that nursing care significantly affects satisfaction, with respectful and clear communication being critical determinants. Several studies underscore the importance of physician-patient communication. Khanal et al. (2021) reported that clear explanations regarding diagnosis and treatment plans enhance patients' trust and satisfaction. Similarly, Rao et al. (2014) found that courteous and professional behaviour of doctors positively influences inpatient experiences. Poudel et al. (2020) highlighted that

timely delivery of services, accessibility of diagnostic tests, and prompt availability of laboratory results are crucial contributors to patient satisfaction in outpatient and inpatient settings.

Quality of hospital infrastructure and non-clinical services also plays a major role. Kumar et al. (2016) reported that cleanliness, comfort, availability of basic amenities, and efficient dietary services significantly influence patients' overall satisfaction. Arshad et al. (2012) emphasized that patient satisfaction is enhanced when hospitals provide a supportive environment, including emotional support and respectful care. Obi et al. (2018) observed that patient satisfaction is higher when hospital staff demonstrate courtesy, empathy, and professionalism across all service domains. Studies from tertiary care centres in India and abroad provide further evidence. Garg et al. (2014) highlighted that timely, accessible, and quality care in hospitals leads to higher satisfaction scores, whereas delays or lack of hygiene reduces patient confidence. Akoijam et al. (2007) documented similar findings in Manipur, emphasizing the importance of patient-centred service approaches in enhancing satisfaction. Aljarallah et al. (2023) reported in Saudi Arabia that hospital-specific characteristics, such as staff competency, infrastructure, and availability of diagnostic facilities, strongly correlate with patient satisfaction. Hu et al. (2020) found that patient demographic factors, including age, gender, and residence, influence satisfaction levels in Chinese tertiary hospitals.

Finally, Siniyiza et al. (2022) demonstrated that comprehensive evaluation of service domains, including admission, physician care, nursing care, and dietary services, provides actionable insights for healthcare quality improvement. Across the literature, a consistent observation is that patient satisfaction is not determined solely by clinical outcomes but by an integrated experience encompassing interpersonal interactions, hospital environment, and service efficiency. These studies collectively suggest that continuous assessment of patient satisfaction is essential for improving hospital service quality, fostering patient trust, and promoting better health outcomes. Given this background, the present study aims to explore patient satisfaction comprehensively in a tertiary care hospital setting in Manipur, focusing on both clinical and non-clinical service domains.

Objectives

The present study was designed to comprehensively evaluate patient satisfaction at a tertiary care teaching hospital in Manipur, focusing on both clinical and non-clinical service domains. The first objective was to assess the overall level of satisfaction among inpatients, quantifying their experiences using a structured measurement tool to determine how effectively the hospital meets patients' expectations regarding healthcare delivery. The second objective aimed to evaluate satisfaction across specific service domains, including admission procedures, physician and nursing care, comfort, cleanliness, diagnostic and laboratory services, and dietary provisions, in order to identify which aspects of hospital services contribute most significantly to patient satisfaction. The third objective was to identify key factors influencing patient satisfaction, encompassing both clinical competence and non-clinical elements such as administrative efficiency, interpersonal communication, and the hospital environment, to provide actionable insights for healthcare administrators. By achieving these objectives, the study sought to highlight strengths and areas for improvement in service delivery, inform evidence-based interventions to enhance quality of care, and promote a patient-centred approach that fosters positive health outcomes, better adherence to treatment, and greater

overall patient trust and satisfaction.

Materials and Methods

A cross-sectional study was conducted at Shija Hospital and Research Institute, a 350-bed private tertiary care teaching hospital in Langol, Manipur, over four weeks from 12th July to 8th August 2023, including all inpatients aged 18 years and above who provided verbal consent, while excluding paediatric patients, critically ill individuals, and those admitted for less than 24 hours; a total of 75 eligible patients were recruited using convenience sampling. Data were collected using a structured, pre-tested interview schedule divided into two sections say socio-demographic details and patient satisfaction across six domains using a 5-point Likert scale, with scores ≥ 50 indicating satisfaction. Interviews were conducted by trained medical undergraduates under the supervision of the hospital's Medical Social Worker, taking approximately 4-5 minutes per patient. Data were entered into MS Excel, cleaned, and analysed using SPSS version 25, with descriptive statistics including mean, standard deviation, frequencies, and percentages to summarize results. Ethical clearance was obtained from the Institutional Ethics Committee of the hospital, verbal informed consent was secured, and confidentiality of all collected information was strictly maintained.

Analysis and Results

The analysis of patient responses regarding admission procedures reveals a generally high level of satisfaction among participants. Most patients reported that the reception counter was easy to locate, with 30 respondents agreeing and 37 strongly agreeing. Queuing arrangements were moderately well-rated, with 35 participants providing neutral responses and 39 expressing agreement or strong agreement, indicating room for slight improvement in organizing patient flow. Registration staff were largely perceived as friendly and communicative, as 33-32 patients agreed or strongly agreed with these statements, and timely preparation of files and documents received high ratings from 64 participants (scores of 4 and 5). These findings suggest that the hospital's front-desk services are effective in meeting patient expectations, though minor adjustments in queuing management could further enhance satisfaction. Regarding clinical services, including physician and nursing care, responses indicate very high levels of patient satisfaction. Nearly all patients (72-77) acknowledged that doctors explained illnesses and treatment plans clearly, spent adequate time with patients, and maintained professional courtesy. Similarly, nursing care received positive feedback; 65-72 patients agreed or strongly agreed that nurses were respectful, communicated understandably, and provided clear explanations about treatments. These results demonstrate that both physician-patient and nurse-patient interactions contribute significantly to overall patient satisfaction, reflecting the hospital's emphasis on interpersonal communication and quality clinical care. The high mean responses in these domains suggest that patients perceive the clinical staff as competent, approachable, and attentive, which is consistent with literature emphasizing communication and staff courtesy as critical determinants of satisfaction (Khanal et al., 2021; Rao et al., 2014).

In terms of non-clinical services, patient satisfaction was generally positive but more variable across domains such as comfort, cleanliness, diagnostics, and dietary services. Clean water availability, personal hygiene products, ward cleanliness, and power supply received high ratings (32–38 participants agreeing or strongly agreeing), though appliances for daily activities, such as fans and heaters, had a slightly higher proportion of neutral responses (8–5

participants), indicating moderate satisfaction in this area. Diagnostic and laboratory services were rated favourably, with most patients finding the lab easily accessible, obtaining timely results, and interacting with courteous staff. Dietary services received mixed responses: while meal hygiene and accessibility were satisfactory, the quality of meals was rated lower, with 7 participants expressing disagreement or neutrality, and drinking water was mostly considered adequate. To sum up, the findings indicate that clinical care consistently meets patient expectations, whereas non-clinical services, particularly environmental comfort and meal quality, present opportunities for targeted improvement. The high frequency of agreement and strong agreement across most service domains reflects an overall patient satisfaction level that is very positive, aligning with the study's reported mean satisfaction score of 103.87 ± 9.64 , reinforcing the hospital's effectiveness in delivering both medical and support services.

Discussion

The present study demonstrates a high level of patient satisfaction across both clinical and non-clinical service domains at Shija Hospital and Research Institute, reinforcing the importance of patient-centred care as a critical indicator of healthcare quality. Patient satisfaction, as emphasized by Marshall and Hays (1994), reflects the alignment between patients' expectations and their actual healthcare experiences, encompassing cognitive, emotional, and perceptual dimensions. In this study, all inpatients achieved satisfaction scores above the cutoff of 50, with a mean score of 103.87 ± 9.64 , highlighting that the hospital effectively met the expectations of its patients. High satisfaction in admission procedures, particularly the ease of locating the reception counter, friendliness and communication skills of registration staff, and timely preparation of documents, aligns with findings from Patavegar et al. (2012), who reported that efficient administrative processes significantly influence overall patient satisfaction. Although queuing management received slightly more neutral responses, these minor gaps indicate an opportunity for improving patient flow, consistent with the literature suggesting that small administrative refinements can enhance the patient experience (Siniyiza et al., 2022).

Clinical care, including physician and nursing services, emerged as a key contributor to patient satisfaction. Nearly all participants agreed or strongly agreed that doctors provided clear explanations regarding illnesses, spent adequate time discussing treatment plans, and demonstrated professional courtesy. Similarly, nursing care was rated highly in terms of respect, communication, and treatment explanation. These findings resonate with the work of Khanal et al. (2021) and Rao et al. (2014), who highlighted that effective communication and courteous interactions significantly strengthen trust and adherence, ultimately promoting better health outcomes. The results also align with Johansson et al. (2002), who emphasized that nursing care is a central determinant of patient satisfaction. The high ratings in these domains suggest that Shija Hospital's clinical staff maintain strong interpersonal skills and professionalism, which are crucial for fostering patient confidence and perceived quality of care. Poudel et al. (2020) similarly observed that timely and attentive physician and nursing services are associated with higher patient satisfaction in tertiary care settings.

Non-clinical services, including comfort, cleanliness, diagnostics, and dietary provisions, also received positive responses, although with slightly greater variability. Availability of clean water, hygiene products, power supply, and ward cleanliness were highly rated, indicating that environmental and infrastructural factors met patients' expectations.

Diagnostic and laboratory services were efficient, accessible, and courteous, echoing findings by Aljarallah et al. (2023) and Hu et al. (2020), who reported that hospital infrastructure and staff competence significantly impact patient satisfaction. Dietary services showed mixed feedback, particularly regarding meal quality, which received some neutral and lower ratings, highlighting a potential area for improvement. This is consistent with Kumar et al. (2016) and Arshad et al. (2012), who noted that non-clinical services such as dietary provisions and comfort significantly influence patients' overall hospital experiences. Overall, the study underscores that while clinical care largely determines satisfaction, non-clinical factors contribute substantially to the holistic patient experience, supporting Akoijam et al.'s (2007) emphasis on patient-centred service approaches. Lastly, the study confirms that patient satisfaction is multidimensional, influenced by clinical competence, communication, administrative efficiency, and environmental comfort. The consistently high ratings across most domains suggest that Shija Hospital delivers effective, patient-centred care, although targeted improvements in queuing management and meal quality could further enhance satisfaction. Continuous monitoring of patient satisfaction, as recommended by Obi et al. (2018) and Siniyiza et al. (2022), provides actionable insights to improve service quality, strengthen patient trust, and promote better health outcomes, reinforcing the importance of integrating both clinical and non-clinical aspects into quality improvement strategies.

Conclusion

The findings of the present study indicate that patient satisfaction at Shija Hospital and Research Institute is high across both clinical and non-clinical service domains, reflecting the hospital's effectiveness in delivering comprehensive, patient-centred care. Clinical services, including physician and nursing care, received particularly strong ratings, with patients acknowledging clear explanations of illnesses and treatment plans, adequate consultation time, and professional, courteous behaviour. Administrative processes such as admission procedures, file preparation, and staff helpfulness also contributed positively to overall satisfaction. These results demonstrate that both the competence and interpersonal skills of healthcare providers, alongside well-organized administrative services, are essential for achieving high levels of patient satisfaction in tertiary care settings. While clinical care consistently met patient expectations, the study identified areas for potential improvement in non-clinical services, particularly environmental comfort and dietary provisions. Neutral responses regarding appliances for daily activities and meal quality suggest that targeted interventions in these areas could further enhance the overall patient experience. The results underscore that patient satisfaction is multidimensional, influenced not only by medical outcomes but also by the hospital environment, efficiency of services, and the responsiveness of staff. Continuous monitoring and systematic assessment of patient satisfaction provide valuable feedback for quality improvement, enabling hospitals to strengthen patient trust, optimize service delivery, and promote better health outcomes. In conclusion, the study confirms that Shija Hospital delivers effective, patient-focused care, and by addressing minor gaps in non-clinical domains, it can further enhance the overall quality of healthcare services while fostering a more holistic and satisfying patient experience.

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Table 1: Participants' Ratings of Healthcare Services Across Key Hospital Domains

Services	Responses				
	1	2	3	4	5
Admission procedure					
Easiness to locate the reception counter	0	0	8	30	37
Queuing line was organized	0	1	35	21	18
Registration staff is friendly & helpful to you	0	0	10	33	32
Registration staff has good communication skills	0	0	11	33	31
Timely preparation of files and documents	0	2	9	40	24
Physician care					
Doctor explains about the illness/disease	0	0	3	31	41
Doctor spends adequate time in explaining about treatment plan	0	1	3	25	46

Doctors are courteous and professional	0	1	4	34	36
Nursing care					
Nurses respectful and courteous in handling patients	1	2	6	27	39
Nurses communicate understandably with patients	1	0	3	33	38
Explanation of treatment by nurses	1	0	2	38	34
Comfort and Cleanliness					
Availability of clean water for personal use	0	2	16	27	30
Availability of personal hygiene products (Sanitizers, Soaps)	0	0	8	32	35
Maintenance of cleanliness of the ward	1	3	5	37	29
Availability of appliances for basic daily activities (Fans, Heaters, Phone call booths)	0	8	5	32	30
Regular power supply of ward	0	0	0	38	37
Diagnosis and laboratory services					
Ease of accessibility or location of lab/imaging centre	0	0	11	26	38
Availability of lab results within stipulated time	0	0	12	29	34
Waiting time for getting the investigation done (Imageology)	0	0	15	38	22
Courteousness of lab staffs	0	0	14	33	28
Dietary services					
Availability of drinking water	0	0	52	20	3
Quality of meals	3	4	31	25	12
Maintenance of hygiene by the caterers	0	0	29	32	14
Easy feasibility of accessing the catered food	0	1	30	32	12
Regularity and punctuality of the catered food	0	2	29	28	16