

Impact of Waiting Time on Patient Satisfaction

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ABSTRACT

OPDs are described as the face of any hospital, as it is often one of the first points of contact between patients and the hospital. The impression about a hospital's OPD often influences the patients' sensitivity towards the hospital. Therefore it is essential to ensure that OPD services provide an excellent experience to the customers. With the increase in the outpatient volume and patient flow, there may be an increase in the blockages, which in turn, increases the waiting time. Patients perceive long waiting times as barriers to actually obtaining services. Reducing waiting time and making sure that patients receive the right care at the right time, will have a significant beneficial effect on the quality of care patients receive. In turn, this will improve patient outcomes and reduce the cost of care. A study was carried out in a Tertiary Care Hospital in Pune to determine the average time spent by the patient in the OPD, to identify the factors leading to high waiting time and assess the patients experience regarding the Out Patient service provided by the hospital. It was found that the average time a patient spends in the OPD was 60mins. The major bottleneck causing this high waiting time was found to be the waiting time for consultation which was 40 minutes on an average. Information gathered during the survey also revealed that 33% patients waited for 30- 60mins for the doctor while 32% patients waited for over an hour.

KEYWORDS: Out patient Department(OPD), patient satisfaction, waiting time, consultation, online appointment, services.

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I. INTRODUCTION

Out Patient services is the most important services provided by all the hospitals as it is the point of contact between hospital and the community. It is an ambulatory care centre which provides to all members of a community the whole scope of services that are needed to keep them in good state of health directly or by referral to more qualified institutions. OPD in a hospital serves the facility for diagnosis and treatment of patients. Many patients gain their first impression of the hospital from the OPD. In other words, the first impression will have lasting effects.

Patient waiting time has been defined as "The length of time from when the patient enters the outpatient department to the time the patient actually leaves the OPD".

Usually it is observed that patients at the hospital OPDs have to wait for disproportionately long time before they can get medical treatment or advice by professional healthcare workers. In a competitively managed healthcare environment, long waiting time of patients in an OPD adversely affects the hospitals ability to attract new increased business. It is difficult to sell services if individuals are dissatisfied with the delayed process and increased waiting time.

There are many indicators of quality assurance in hospitals. In outpatient departments one of the important indicators of quality assurance for patients is "waiting time". Hence it is detrimental for a hospital on the whole to have long OPD waiting time.

The Super Speciality Hospital in Dehradun is a state of the art hospital which has been set by the pioneer of healthcare in Dehradun. It is a 200 bedded super speciality hospital which is equipped with premium facilities and high quality service and care.

Aim: To analyse the waiting time in the OPD and assess its impact on patient satisfaction.

Objectives:

To determine the average time spent by the patient in the OPD.

To identify the factors responsible for prolonged waiting time in the OPD.

To study the cause of delays and suggest interventions.

To assess the patients satisfaction with the OPD services provided.

II. Literature Review:

Out Patient Department (OPD)

OPD is defined as a part of the hospital with allotted physical facilities and medical and other staff in sufficient number, with regular scheduled hours, to provide care for patients who are not registered as in patients.

A major problems faced by the hospitals when it comes to running the OPD is the extended waiting periods and overcrowding. The waiting period is one of the most important indicators of quality of service. Thus the prolonged waiting time directly reflects on the quality reflects on the quality of services being provided.

Healthcare organizations that strive to deliver exceptional services must effectively manage their clinic wait. Failure to incorporate consumer driven features into the design of wait experience could lead to patient and provider dissatisfaction.

Waiting time refer to the time a patient waits in the clinic before being seen by one of the clinic medical staff. Patient clinic waiting time is an important indicator of quality of services offered by the hospital.the amount of time a patient waits to be seen is one factor which affects utilization of healthcare services. Keeping patient waiting unnecessarily can be a cause of stress for both patient and doctor . waiting time is a tangible aspect of practise that patient will use to judge health personnel,even more than their knowledge and skill.

Waiting time is the time required just after patient’s arrival at the OPD to meet his health need. It is the total time elapse in circulating the patient from one room to another. These include the time spent for collecting the treatment ticket,for attending the physician, for submission of sample for investigation and for collecting medicines including receiving instruction for their use. Patient’s waiting depends on many factors including efficiency,sincerity and punctuality of the health care providers as well as the existing facilities of the institution.

The institute of medicines (IOM) recommends that,at least 90% of patients should be seen within 30minutes of their schedule appointment. This is however, not the case inmost developing countries, as several studies have shown that patient spend 2-4 hours in the out patient departments before seeing doctor . A source of dissatisfaction with healthcare reported by patient is having to wait a long period of time in the clinic and several studies have documented the negative associated between increased waiting time and patient satisfaction with primary care.

III. METHODOLOGY

Research Design- The research design used in this study is both Descriptive and Exploratory.

Quantitative Method of Study- Observational time-motion study The details of patient, time of his/her entry,the time taken by the patient to move through various departments, till the exit of the patient was noted and recorded .

Qualitative Method of Study- A Patient Experience Feedback questionnaire was administered to the OPD patients. Questionnaire administered is as given in the appendix.

OBSERVATIONS

By analyzing the OPD count of the past 6 months a steady decline in the patient count was found-

Table 1-OPD Patient Count

	AUG	SEP	OCT	NOV	DEC	JAN
New Patients	1048	1018	1019	964	877	920
Follow-up Patients	610	604	629	529	476	604
Total	1658	1622	1648	1463	1353	1524

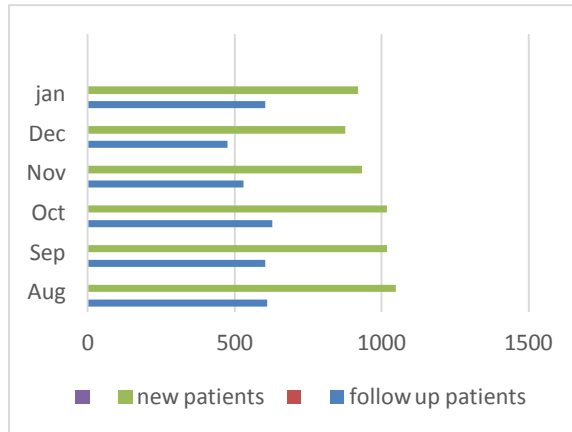


Fig. 1 OPD Patient Count

The time motion study conducted in the OPD showed the various bottlenecks in the OPD patients flow which caused increased waiting time.

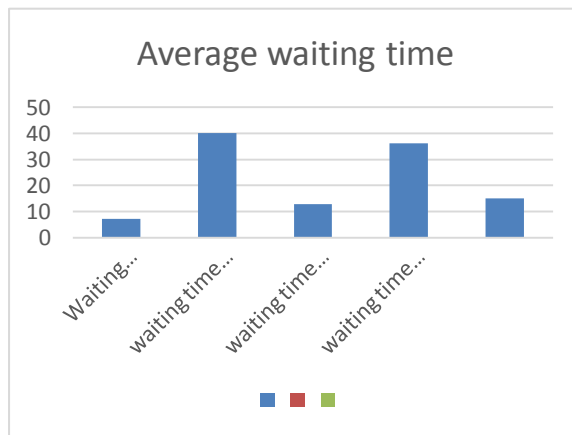


Fig.2 - Average Waiting Time

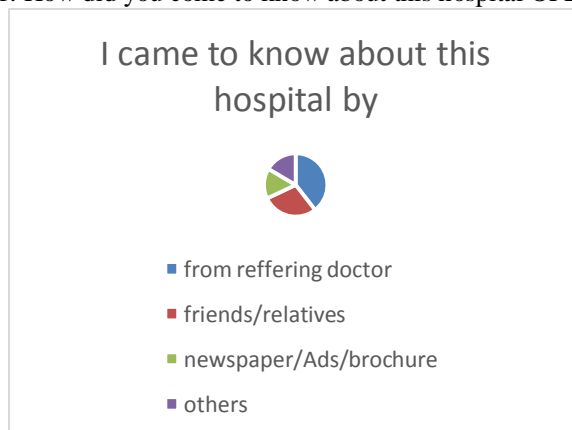
The entire OPD patient flow is the waiting time for consultation.

- Average = 40 minutes
- Appointment Patients = 45.17 minutes
- Walk in Patients = 39.93minutes

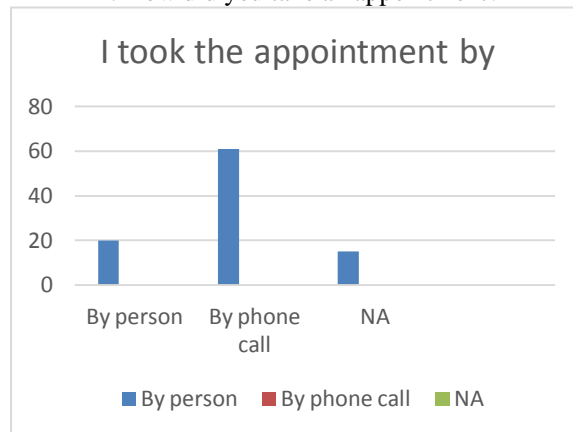
Patients Experience Feedback-

A Pre-tested Questionnaire was administrated to a sample of 200 OPD patients in a cross sectional descriptive research consisting of to 106(53%) female and 94 (47%) male patients.

1. How did you come to know about this hospital OPD?



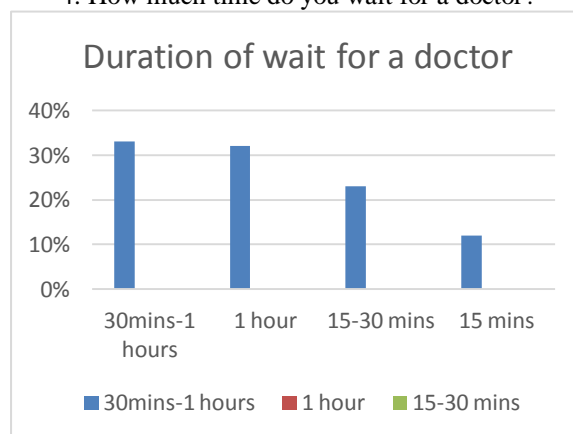
2. How did you take an appointment?



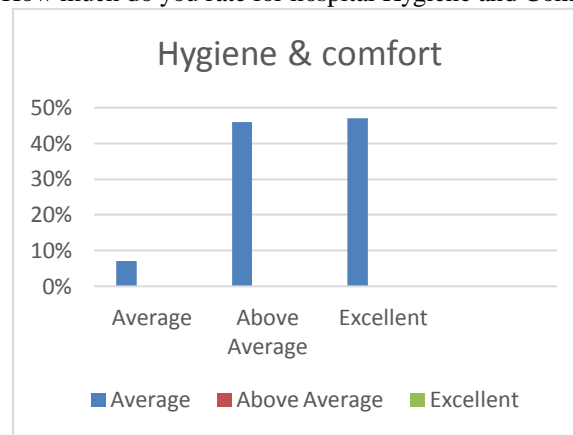
3. How much you satisfied of OPD appointment?



4. How much time do you wait for a doctor?



5. How much do you rate for hospital Hygiene and Comfort?



IV. RECOMMENDATIONS

Displaying the consultation's timing in the OPD, as well as online will reduce the number of enquires made by the patients.

Lab reports should be dispatched at the lab counter and not in the OPD area or a separate counter for lab report dispatch and appointments.

Proper training of the staff.

Doctors should be advised to their allotted slots.

Rounds should be taken prior to or after the OPD hours.

Lab technician must be available at all times.

Residents or junior doctors must be made available or in case of unavailability casualty can carry out minor procedures.

Once the OPD schedule is finalized, appointments should be taken directly onto the HIS scheduling system. A system generated SMS can be sent to the patient confirming his/her OPD timing.

V. CONCLUSION

The objectives was to determines the various causes of increased waiting time in the OPD. Two categories of patients were observed - those with appointment and those without (walk in). An unusual observation regarding the waiting time of these 2 categories of patient was made- the patients who took an appointment had a longer waiting time than those who didn't. This was due to improper handling of appointment system. Rescheduling of the various OPDs would help in reducing the waiting time and thus reduce peak workload for the staff.

The patient experience feedback was done to assess the satisfaction level among the OPD patients and look for improvements that can be made. This will bring about efficiency in healthcare delivery and increased patient satisfaction.

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