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A Cross -sectional Study on Patients' Perspective Towards Dermatology Outpatient Services from a Tertiary Care Center in Nepal

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Abstract

Introduction: Patient-centered care has received greater prominence in recent years, and it is paramount to assess the patient's satisfaction to improve the quality of healthcare services. The present study is aimed at understanding the patients' perspectives regarding dermatology outpatient services offered at a tertiary care center to determine the areas for improvement for better patient satisfaction.

Objective: This study is intended to understand the patients' perspectives regarding a typical dermatology OPD setup and to identify the areas for improvement in a tertiary center in Nepal.

Materials and Methods: The descriptive cross-sectional study was carried out using a content-validated, pre-tested, standardized, and translated questionnaire. All the patients who visited the outpatient department of Dermatology tertiary care center during the month of April 2022 and were willing to participate in the study were included.

Results: A total of 157 patients participated in the survey. The majority of the participants were males (56.7%) and belonged to urban domiciles (80.9%). Nearly 42% of the subjects were seeking dermatology consultation for the first time, and 68.2% responded that the duration of consultation was sufficient. The details of symptoms, clinical results, and medication were clearly understood by 89.8%, 82.2%, and 73.9% of the subjects, respectively. Maintenance of privacy was reported by 76.4% of the participants. However, 25.5% of the subjects reported a waiting time of \geq 4 hours for consultation, and 34.4% suggested the need for more manpower.

Conclusion: The majority of the patients had a high degree of satisfaction. The areas of improvement include the adoption of technology-based appointment booking system, ensuring a good waiting ambience, increasing manpower, and reducing waiting time for consultations.

Key words: Dermatology outpatient service; Patients' satisfaction; Quality of healthcare services

Introduction

Patient-centered care has received greater prominence in recent years, and patient satisfaction has been identified as an important indicator of the quality of care. Improved patient satisfaction indirectly facilitates treatment adherence and better clinical outcomes. In the past, the quality of life of the patients was frequently assessed, while the patient's perception and their feedback were largely ignored. However, in

recent years, the assessment of patients' perceptions regarding the quality of healthcare services has gained wider attention. ¹⁻³

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The outcome of patients' visits to the outpatient department (OPD) is largely influenced by patient factors like age, sex, and underlying diseases, environmental factors like OPD settings, and the competence of the healthcare provider. It is important to identify such factors to make the necessary changes in healthcare facilities to provide a more patientcentric care. However, there are very limited studies examining patient satisfaction in dermatology clinics. Few studies are available in the literature from Nepal where the authors assessed patient satisfaction with hospital services and recognized the challenges of skilled manpower, communication skills, and the need of surveys to better understand the patients' perspective and improve the quality of healthcare. ⁴⁻⁶ The present study is intended to understand the patients' perspectives regarding a typical dermatology OPD setup and to identify the areas for improvement in a tertiary center in Nepal. With this study, we intend to highlight the strong and weak factors that influence overall patient satisfaction. This study is expected to benefit both patients and healthcare professionals in their interactions and overall experiences of receiving and providing healthcare. It may help achieve the overarching goal of optimizing OPD operations, increasing patient satisfaction, and ultimately improving the quality of healthcare services provided in tertiary care centers.

Design and methodology

The descriptive cross-sectional study was conducted in the Dermatology OPD at B.P. Koirala Institute of Health Sciences (BPKIHS), Nepal, one of the largest tertiary care centers in Eastern Nepal. Institutional ethical committee approval was obtained prior to the initiation of the study (Ref No.101/078/079). The patient selection was carried out for one month in April 2022. Patients not willing to participate in the study were excluded. A content-validated, pre-tested, standardized, and validated translated questionnaire was used for gathering the data, and the patients were requested to fill it out during their waiting time in OPD.

The data collected were the sociodemographic profile of the participants (age, gender, address, area of living, education attainment); satisfaction regarding the appointment booking system and the changes required to improve the facility; their opinion regarding the OPD environment and doctor consultation; and their future preferences and recommendations for overall improvement. Statistical analyses of the collected data were performed using the IBM SPSS software version 10.0. Continuous variables were expressed as the mean (±SD) or as the median with total and interquartile ranges (25th-75th percentiles), whereas chi-square was used for categorical variables and was expressed as a number (%).

At the study center, there are general OPDs six days a week, while special clinics like pediatric and pigmentary clinics, allergy clinics, leprosy clinics and geriatric clinics are conducted once a week on specified days. The EHS services also include a paying OPD. The general OPD is a walk in OPD system where no prior appointment is required for patients. An online appointment booking system has been in place since the inception of COVID for both general and paying OPD. A referral system is used to evaluate patients in the special clinics. The daily clinical services are provided by up to 2 consultants and up to 8 resident doctors from 8 a.m. to 5 p.m. on working days.

Results

The study included a total of 157 patients who visited the dermatology OPD after receiving consent. **Table 1** summarizes the sociodemographic characteristics. The mean age of the participants was 29.19 ± 11.48 years. Males made up the majority (56.7%), with females making up 43.3%. The majority of the participants (80.9%) resided in urban areas of Nepal. Nearly 42% of the participants visited the outpatient department for the first time, and 51% of the total participants were satisfied with the appointment booking system of the center.

Around 27.5% of the participants opined that there should be more booking counters to reduce the waiting time, while the same proportion of participants emphasized the need for hospital staff to work faster. About 13% of the participants felt the need for a prebooking system to visit the OPD, and 11% emphasized the need for a different appointment and billing line for geriatric, pediatric, and pregnant patients. The majority (87.9%) of the participants felt that the implementation of a universal health card (IC card) system might be helpful for patients.

Regarding the OPD environment, 68% of the participants felt the need for air conditioning the facility and 15% highlighted the need for improving the ventilation. Majority (85%) of the subjects felt the necessity of a free drinking facility in the OPD area. Regarding seating arrangements in the waiting area, 52% of participants emphasized the need for seat reservations for geriatric and pregnant females.

A significant number of participants (25%) reported the waiting time for consultation as >4 hours, while it was only <30 minutes for 17% of the subjects. Around 23% emphasized the need for a parallel line for special groups such as pediatric, geriatric, and pregnant subjects. Nearly 31% of the participants were in favor of a fast-track consultation facility. Additionally, 34.4% of the participants suggested that there should be more doctors available, while 27.4% of them thought that a playroom for children would be helpful, and 19.7% chose an option for a TV screen in the waiting area.

Table 1: Sociodemographic profile

Sociodemographic Characters	Frequency	
Total Participants	157	
Mean age	29.19 ± 11.48 years	
Gender	Male:56.7%, Female:43.3%	
Domicile	Urban (80.9%) Rural (19.1%)	

Table 2 reveals the waiting time in the OPD for the consultation. The waiting time for patients for their turn for consultation ranged from less than 30 minutes to more than 4 hours. **Table 3** summarizes the opinions and responses of participants regarding different aspects of the consultation in the dermatology OPD.

Table 2: Waiting time in the OPD for the consultation

Time duration of waiting	Percentage of respondents (%)
<30 minutes	17
Around 1 hour	19
1-2 hours	24
2-4 hours	15
>4 hours	25

Table 3: Participants' opinion regarding consultation

Questions	Positive responses (%)
The number sequence given to consult the doctor was followed.	70
The doctor gave enough time during consultation.	68
The doctor properly explained the symptoms and disease course.	90
The doctor explained the test reports satisfactorily.	82
The doctor explained the test reports satisfactorily.	82
The doctor explained the prescribed medications satisfactorily.	74
Privacy in the OPD was maintained during examination.	76
There should be a separate desk to explain the medications prescribed	76
Female patients should be consulted by female doctors	59
Complete skin examination of the body is necessary.	59
Computer must be kept maintaining hospital records for future.	83
Will be presenting to the OPD for follow- up when called upon, as the services provided at the dermatology OPD was satisfactory.	79
Will be recommending the center's dermatology OPD to friends and family.	69

Discussion

Patient perception is an important tool to identify areas for improvement in an OPD facility by collecting feedback and assessing patient satisfaction. This approach has been used in many countries to identify gaps in service delivery, communication, and patient experience, and to improve patient satisfaction and overall healthcare outcomes. ^{1-3,7} The current study was conducted to gather patients' opinions on services provided at the dermatology OPD through their perspectives, with the intention of identifying areas for improvement and improving overall patient satisfaction.

Several studies have investigated the quality of hospital management and consultation systems from patients' perspectives and found that factors such as a physician's specific skills, attention to the patient's symptoms and interest in their medical problems, and interpersonal skills are important in determining patient satisfaction. 1-3,7 According to a patient satisfaction study conducted in a tertiary care institution in Nepal, the overall satisfaction rate was 74.78%, with high marks in interpersonal manners and communication skills. On the other hand, challenges with medical staff availability and accessibility were raised, underscoring the significance of resolving these concerns in order to improve the quality of healthcare. ⁴ Both patient recovery and the standard of treatment were impacted by efficient communication in the medical field. 5 Specific areas of low satisfaction were recommended to be the focus of interventions, and the necessity of regular, varied facility-level surveys for a thorough understanding has been emphasized. ⁶ Other factors that have been identified as impacting satisfaction include the amount of time the patient spends with their physician, the care received from non-physician personnel, the physician's ability to provide explanations and demonstrate concern for the patient's health, and the physical comfort, emotional support, and respect for patient preferences provided during the consultation. Furthermore, certain studies have linked patient satisfaction to health-related behaviors such as compliance, switching providers, and self-reported improvements in health. 8

The standard of any service-providing facility, including healthcare, depends on the satisfaction of its customers. An outpatient department is the place where a patient often receives medical care for non-emergency conditions. The current study addressed the basics of patient satisfaction in the OPD setup. The study findings revealed that the majority of patients were satisfied with the duration of consultation time provided by the clinician. Satisfactory feedback was also received regarding the explanation of disease, drugs, and test reports, the maintenance of privacy, and the recommendation of OPD services to others. These factors were addressed in other studies evaluating patients' satisfaction and are comparable. 1-3,7

More than half of the current study participants (58%) were returning visitors, reflecting the overall satisfaction of the patients. Nearly half (51%) of the subjects were satisfied with the appointment booking system. In the majority of settings, patients can walk in during the OPD hours without a prior appointment for consultation. A significant number of current study subjects (27.54%) opined that there should be more counters or staff available for booking the appointment. This can be taken as an opportunity to redistribute the limited resources of the facility to achieve optimal patient satisfaction. The majority (87.9%) of participants agreed that implementation of an IC health card system may enhance work efficiency. Such systems have worldwide implications for storing patient data and can function across different healthcare settings. 9

The ambience, cleanliness, properly managed waiting areas, and courtesy of the attending staff clearly play vital roles in patient satisfaction with the facility. ¹⁰ The current study included key queries regarding the air conditioning system, the availability of drinking water, sufficient seating arrangements for the patients and accompanying person, availability of play areas for children and TV screens in the waiting area, and even the ambience of the waiting area. Most younger participants felt that these were important inclusions in the OPD waiting area. Female patients also opined that there should be reserved seats for pregnant and geriatric groups. Several studies that have investigated waiting ambiance as a factor influencing patient satisfaction have yielded similar results. ^{3,7}

A significant number of study participants (25.5%) reported the waiting time for consultation as >4 hours, while approximately 17% reported it as <30 minutes. A token system was already in place for better organization of the queue, and majority (70.1%) expressed satisfaction with it, as it helped in proper coordination. However, about 34.5% felt that the number of doctors should be increased. It is important to note that the waiting time for consultation largely depends on the number of visitors and service providers available, and this is a common problem in resource-poor countries. This finding is consistent with previous study results. ¹¹

There was an overall positive response towards the consultation services among the patients with regard

to consultation time, explanation of symptoms, test results, and medications. The majority of the participants reported that their privacy was maintained during consultation. Competence, interpersonal skills, and empathy of physicians are rated as the most vital qualities for patient satisfaction, and this study highlighted the room for improvements in these areas.1 Patient follow-up and referral rates serve as important tools in assessing overall satisfaction. 12 However, a substantial number of patients felt that females must be attended by female doctors. The influence of clinicians' gender on patient interaction has been well documented, and this finding can be considered as an important factor for enhancing patient satisfaction.¹³ The majority of the study participants were willing to revisit the OPD when called upon and would recommend the outpatient services to their friends and family. A small proportion (4.5%) of the participants expressed their dissatisfaction with the OPD services, highlighting the gaps and opportunities for improvement. This can be considered the strength of the services being provided and a necessity for improving them for the long-term well-being of both the institute and the

The recommendations that can be made on the basis of the current study are the implementation of a faster and more efficient booking system, an upgraded waiting environment, an increase in seating arrangements in the waiting area, the prioritization of special groups, and an overall increase in manpower. Further studies evaluating individual tools of patient satisfaction may help identify the gaps and room for improvement.

Conclusion

The overall patient satisfaction with the dermatology OPD was satisfactory regarding doctor consultation and the appointment booking system. The findings were consistent with those of studies conducted in similar settings worldwide. However, there is scope for improving patients' satisfaction, particularly in the appointment booking system, the ambiance of the waiting area, and the doctor's waiting time. These challenges are prevalent in the majority of resource-poor settings, where providing quality healthcare services is a top priority, but patient and environmental factors are given less attention.

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