

REAL-TIME PATIENT SATISFACTION SURVEY IN THE OPHTHALMOLOGY DEPARTMENT OF A TERTIARY CARE HOSPITAL IN PAKISTAN: A TOOL FOR QUALITY IMPROVEMENT

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Abstract: Patient satisfaction is a critical indicator of healthcare quality and is essential for improving service delivery in medical settings. Understanding patient satisfaction and the factors that contribute to it can help healthcare providers enhance patient experiences and outcomes. **Objective:** To assess patient satisfaction in the ophthalmology department and identify its contributing factors. **Methods:** A cross-sectional study was conducted in the Ophthalmology Department of Nishtar Medical University and Hospital, Multan, from February 2023 to February 2024. A total of 400 patients visiting the department were selected for the study. Patients' demographic data and satisfaction levels were recorded using a questionnaire in both English and Urdu. The questionnaire included questions about waiting time, staff behavior, communication with specialists, and overall department satisfaction. Patients answered on a Likert scale from 1 (strongly disagree) to 5 (strongly agree). Statistical analysis was performed to calculate satisfaction percentages and confidence intervals. **Results:** Overall, 224 patients (56%, 95% CI: 50-60.5) reported satisfaction with the ophthalmology department. More than half of the participants expressed satisfaction with various aspects of hospital services, including healthcare (65%), specialist advice (55%), department hygiene (51%), advanced facilities (50%), and post-operative care (60%). However, satisfaction scores for waiting times were lower, ranging from 45% to 55%. **Conclusion:** Most patients were satisfied with the ophthalmology services provided at the hospital. However, there is room for improvement, particularly in reducing waiting times, to enhance patient care and satisfaction.

Keywords: Medical Care, Ophthalmology, Patient Satisfaction, Post-Operative Care, Waiting Time

Introduction

Patient satisfaction is a top priority of healthcare staff in every field of medicine, including ophthalmology, to ensure effective service. Professionals focus on evidence-based feedback to provide the best care. Around 36 million people are blind, and 216.6 million people have visual impairment all over the world, most of the patients can be treated or saved from these conditions beforehand. (1, 2). With technological advancement and modern instruments, eye care in Pakistan has significantly improved, and blindness has been reduced. (3, 4). Pakistan is among the developing countries that provide effective visual services to all social classes.

Evaluating patient satisfaction in ophthalmology departments is essential as anticipation is more significant because vision is the most concern for patients. Literature suggests that several factors, including time designated by specialists, waiting time, doctor-patient communication, teamwork, and accessibility to healthcare, significantly improved patient satisfaction. (5, 6). Effective communication was the most crucial factor recognized in most studies, which led to a better experience. (7).

Limited research is available regarding patient satisfaction in ophthalmology departments in low—and middle-income countries like Pakistan. This study assessed patient satisfaction in the ophthalmology department and the factors contributing to it.

Methodology

A cross-sectional study was conducted in the Ophthalmology Department of Nishtar Medical University Hospital Multan from February 2023 to February 2024. A total of 400 patients visiting the department were selected for the study by consecutive sampling. The sample size was calculated using Cochran's formula, keeping a 95% confidence interval, 0.5 population proportion, and a 5% margin of error and adjusting for a 5% non-response rate. Patients who did not complete the questionnaire or refused to participate were excluded. All the patients provided informed consent to participate in the study. The ethical board of the hospital approved the study.

A questionnaire including questions in both English and Urdu about waiting time, the behavior of staff, communication with specialists, and overall likeness of the department recorded patients' demographic data and satisfaction. To test the internal consistency of the questionnaire, it was pre-tested in 20 participants, after which Cronbach's α was calculated to be 0.930, which is satisfactory. Patients answered the questions on a Likert scale from 1 to 5, with 1 being strongly disagreed with and five being strongly agreed with.

Data was assessed using SPSS version 24. Descriptive statistics were used to evaluate the demographic data and individual items of the questionnaire. The Shapiro-Wilk test was used to check the normalcy of the data. Categorical data

was presented as percentages and continuous data was presented as medians and IQRs.

Results

A total of 400 patients were selected for analysis. Most of the population (57%) was women, and 90% was married. The patients' demographics are shown in Table I. More than half the population agreed to be satisfied with the hospital services, including health care (65%), advice of specialists (55%), department hygiene (51%), advanced

facilities (50%), and post-operative care (60%). However, the satisfaction scores regarding waiting times were less, ranging from 45 to 55% (Table II).

With respect to patient satisfaction regarding staff behavior and communication, 55% were satisfied with the level of privacy, 50% were treated with respect, 45% thought the staff to be professional, and 44% agreed that the staff was friendly. Communication satisfaction ranged from 46% to 60% (Table III). Overall, the ophthalmology department satisfied 224 (56%) (95% CI: 50-60.5) (Table IV).

Table I: Patients' demographic characteristics

Characteristics	N (%)
Gender	
Men	172 (43%)
Women	228 (57%)
Marital status	
Married	360 (90%)
Unmarried	40 (10%)
Qualification	
Matriculation	260 (65%)
Intermediate	80 (20%)
Graduate or above	60 (15%)
Residence	
Urban	280 (70%)
Rural	120 (30%)

Table II: Participants' responses regarding waiting time and satisfaction

Questions	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Patient Satisfaction					
Received quality health care	2 (0.5%)	10 (2.5%)	60 (15%)	260 (65%)	68 (17%)
Satisfied by the advice of an ophthalmologist	4 (1%)	12 (3%)	60 (15%)	220 (55%)	104 (26%)
Was treated in a clean and hygienic place	4 (1%)	8 (2%)	104 (26%)	204 (51%)	80 (20%)
Up-to-date facilities and instruments were used	0 (0%)	12 (3%)	116 (29%)	200 (50%)	68 (17%)
Received appropriate post-treatment care and follow-up instructions	4 (1%)	16 (4%)	96 (24%)	240 (60%)	52 (13%)
Waiting time					
Management was efficient in minimizing the waiting time	8 (2%)	28 (7%)	76 (19%)	208 (52%)	80 (20%)
Minimum waiting time to receive medication	8 (2%)	32 (8%)	120 (30%)	180 (45%)	60 (15%)
Treated as a valued patient in waiting time	4 (1%)	24 (6%)	100 (25%)	180 (45%)	92 (23%)
Regularly updated during the waiting period	0 (0%)	16 (4%)	140 (35%)	184 (46%)	60 (15%)
Prompt registration process	4 (1%)	20 (5%)	100 (25%)	220 (55%)	56 (14%)

Table III: Participants' responses regarding communication and staff behavior

Questions	Strongly disagree	Disagree	Neutral	Agree	Strongly agree
Behavior					
Provided the appropriate level of privacy	4 (1%)	20 (5%)	56 (14%)	220 (55%)	100 (25%)
Treated with respect and dignity	4 (1%)	20 (5%)	72 (18%)	200 (50%)	104 (26%)
Professional and ethical staff	4 (1%)	12 (3%)	84 (21%)	180 (45%)	120 (30%)
Friendly administrative staff	0 (0%)	20 (5%)	104 (26%)	176 (44%)	100 (25%)
Clarity was provided regarding diagnosis and treatment	0 (0%)	12 (3%)	72 (18%)	168 (42%)	148 (37%)
Made comfortable during treatment	0 (0%)	20 (5%)	80 (20%)	216 (54%)	84 (21%)
Communication					
Adequate counseling about the risks and complications of treatment	0 (0%)	12 (3%)	60 (15%)	240 (60%)	88 (22%)

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Explained clearly about further course of action	4 (1%)	24 (6%)	68 (17%)	188 (47%)	116 (29%)
Clear instructions about medication, dosage, and precautions	0 (0%)	12 (3%)	60 (15%)	188 (47%)	140 (35%)
Consulted during treatment and services	0 (0%)	36 (9%)	40 (10%)	216 (54%)	108 (27%)
Informed about delayed or canceled appointment	0 (0%)	36 (9%)	80 (20%)	184 (46%)	100 (25%)

Table IV: Patients’ satisfaction scores

	N (%)	95% CI
Satisfied	224 (56%)	50-60.5
Dissatisfied	176 (44%)	40-49

Discussion

Vision disorders are a frequent cause of concern for patients and the reason for repeated hospital visits. Hospitals often focus on providing the best medical treatment and achieving successful surgical outcomes, but patient satisfaction and feedback should be paid more attention. Transforming medical information through education has been reported to contribute to quality patient care. (8, 9).

The present study revealed that two-thirds of patients were satisfied with healthcare services, postoperative care, and specialists’ behavior and advice. The factors indicating good medical care were implemented, and a majority of patients were aware of their conditions and complications associated with them as the ophthalmologist communicated effectively. Patients felt involved in the decisions regarding their treatment options and were satisfied with follow-up care. The patients agreed that the staff treated them respectfully, were professional, and adhered to ethical guidelines.

The results of this study comply with those of Mbwogge et al., who reported high patient satisfaction scores of ophthalmologists who communicated with their patients, addressed their concerns, and elaborated on the diagnosis and treatment plan. (10). The ophthalmologists in our study addressed the emotional needs of the patients and made them comfortable, leading to good satisfaction scores.

Patients often feel satisfied when services are efficient and timely, i.e., less waiting time before consultation. Santos-Jaen et al. reported a strong relationship between high satisfaction scores in the ophthalmology department and less time in the waiting room. (11) Effective scheduling and appointment procedures lead to smooth patient care. In our study, 52% agreed and 20% strongly agreed that the hospital was efficient in reducing waiting periods. Only 4-8% of patients were not satisfied with waiting time and comfort during those times. A total of 6% of patients did not feel respected and valued during waiting time, which is an area requiring improvement in our department.

The ambiance and physical atmosphere of the department bear great value in satisfying an ophthalmology patient. Alolayyan et al. reported that welcoming warm waiting rooms and clean and high-quality exam rooms result in many satisfied patients. (12). Using technology to enhance patients’ convenience is a great way to increase patient satisfaction. Dia et al. revealed that merging technology and medicine can positively impact patient care. (13). In our study, 50% of patients were satisfied with hygiene and

equipment quality, and 65% were satisfied with the quality of care received.

Overall, 56% of patients were satisfied with the eye care received; these results are similar to studies done in Nepal.(14) and Vietnam(15) but less than developed countries(16-18). These findings provide insight into areas of improvement to increase quality of care and satisfaction scores.

Our study has some limitations. The fact that healthcare providers also took questionnaires may have influenced patient responses. Although measures were taken to eliminate any bias, this may have affected the results.

Conclusion

Most patients were satisfied with the ophthalmology services provided at the hospital; however, there is room for improvement to enhance patient care and satisfaction further.

Declarations

Data Availability statement

All data generated or analyzed during the study are included in the manuscript.

Ethics approval and consent to participate.

Approved by the department Concerned. (IRB/MICH-2545 dated 22-11-22)

Consent for publication

Approved

Funding

Not applicable

Conflict of interest

The authors declared an absence of conflict of interest.

Authors Contribution

TAHMINA SAJJAD (PGR)

Final Approval of version

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Revisiting Critically

HIRA NAVEED (HO) & M.RASHAD QAMAR RAO (HOD)

Data Analysis

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FATIMA SHAMS (MO) & MUHAMMAD SHAKAIB RAO (MBBS)*Drafting & Concept & Design of Study***References**

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