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PATIENT FEEDBACK AS A TOOL FOR IMPROVING EYE CARE SERVICES: INSIGHTS FROM THREE HOSPITALS IN NEPAL

Samsher Thapa [1], Dr. Kapil Khatter [2]

[1] PhD Scholar, Jagannath University, Jaipur, Rajasthan, India
[2] Professor, Poornima University, Rajasthan, India

ABSTRACT

This study evaluates the quality of care and patient satisfaction across three eye hospitals in Nepal: Rapti Eye Hospital, Lamahi Eye Hospital, and Chhanda Kalebabu Eye Hospital. Although these institutions operate under the same overarching management, they are situated in different locations and governed by distinct administrative management subcommittees. The main purpose of the study is to identify differences in patient satisfaction levels among the three hospitals. Additionally, the research seeks to assess the effectiveness of management, recognizing that while these hospitals share a common management board, the quality of care is heavily influenced by the technical and administrative leadership unique to each hospital. A total of 300 patients were surveyed—100 from each hospital—using the SERVQUAL model questionnaire to measure patient satisfaction, a critical indicator of healthcare service quality. The findings reveal key insights into each hospital's performance, highlighting areas of strength and potential improvement. By understanding patient satisfaction levels, hospital management can address weaker aspects of service delivery and enhance overall patient care. This research underscores the importance of patient feedback in evaluating hospital services and informs strategic efforts for continuous improvement in the healthcare system.

Keywords: Patient Satisfaction, Eye Hospitals, Servqual Model, Healthcare Management, and Quality of Care

Corresponding Author

Samsher Thapa,
samsherthapa25@gmail.com

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1. INTRODUCTION

"Hospital management plays a crucial role in the healthcare sector, ensuring that healthcare institutions operate smoothly and provide consistent quality of service to patients. It helps hospitals and healthcare facilities deliver the best care for each patient. Hospital management involves overseeing the operations of healthcare facilities, ensuring that departments within hospitals, clinics, and nursing homes work together efficiently. These professionals collaborate with doctors, nurses, and other healthcare staff to manage daily operations and enhance the quality of patient care. They also develop strategic plans to achieve these goals, playing a key role in the smooth functioning of healthcare institutions". (1)

Nepal Netra Jyoti Sangh (NNJS) operates a network of 28 eye hospitals and over 156 eye care centers throughout Nepal. (2) The Dang Branch of NNJS specifically oversees three eye hospitals: Rapti Eye Hospital, Lamahi Eye Hospital, and Chhanda Kalebabu Narayani Eye Hospital. Additionally, they manage eleven eye care centers located in Rukum-West, Salyan of Karnali Province, and Rukum-East, Rolpa, Dang, and Kapilbastu in Lumbini Province. The Eye Health Program-Rapti and Bahadurgunj is responsible for the governance of these facilities, with a hospital management board overseeing the operations of three hospitals and 11 primary eye care centers. The primary role of the hospital management board is to establish policies and make significant decisions based on the administrative and financial guidelines set by Nepal Netra Jyoti Sangh. Under this board, three administrative management sub-committees are responsible for implementing decisions. The administrative management sub-committee, led by the executive member of NNJS-Dang Branch and consisting of five board members, plays a crucial role. The administrative manager serves as the member secretary, and the other members include the medical director, account representative, and staff representative. The day-to-day administrative management responsibilities are entrusted to the administrative management sub-committee, while the medical director takes the lead in matters related to medical aspects. However, administrative decisions are made jointly by the administrative management sub-committee to ensure effective decision-making.

2. RAPTI EYE HOSPITAL

Rapti Eye Hospital is located at Raksyachaur-4, Tulsipur, Dang, Lumbini Province. It occupies 4 Bigha (2.70 hectares) of land, registered under the name of Nepal Netra Jyoti Sangh. According to the Nepal Blindness Survey of 1981, the prevalence of blindness in the Rapti Zone was 0.87%. This percentage decreased to 0.13% in the second survey of 2010 (RAAB Survey). Rapti Eye Hospital was established in 1986 with the support of Norwegian Church Aid (NCA), Norway. Later in 1996, a dialogue was held between NCA and NABP (Norwegian Association of the Blind and Partially Sighted) to explore the possibility of NABP assuming the role of funding partner to Rapti Eye Hospital, Dang, previously held by NCA. NABP expressed interest not only in continuing the existing eye care activities at the hospital but also in expanding activities in the field of training and rehabilitation for the blind and partially sighted. From January 1, 1998, to 2011, NABP took over the role of NCA as a funding partner to Rapti Eye Hospital, Dang. Additionally, NABP extended its support to Eye Health Program II, Lamahi, starting in2012.

Rapti Eye Hospital has evolved from a secondary level hospital to a tertiary level hospital. It now offers a wide range of comprehensive eye care services, including training for ophthalmology and an academic program for ophthalmic assistants. These services encompass curative, preventive, promotive, and rehabilitative care. Additionally, the hospital specializes in four sub-specialty areas: Retina, Cornea, Oculoplasty, and Pediatrics.

3. LAMAHI EYE HOSPITAL

The Lamahi Eye Hospital was established in 2002 as a satellite weekly clinic of Rapti Eye Hospital in Deukhuri, Dang. It was upgraded from a weekly clinic to a Primary Eye Care Centre on 9th September 2009. The Lamahi Town Development Committee, a local authority, provided 2.88 acres of land for the upgrade of the secondary level eye hospital. This project was constructed with the support of

NABP-Norway and the foundation stone was laid on 23rd November 2010, after which the construction began and was completed in 2012. With a large catchment area, its objective is to provide eye care services to the people of Rolpa, Pyuthan, Arghakhachi, as well as part of the Banke district. The Lamahi Eye Hospital is located in the heart of Lumbini Province, centrally positioned between Chhanda (Kalebahu)-Narayani Eye Hospital, Bahadurgunj, and Rapti Eye Hospital, Tulsipur. It is situated near the Indian border, just 33 kilometers away from Lamahi.

4. CHHANDA(KALEBABU)-NARAYANI EYE HOSPITAL

Chhanda Kalebabu Narayani Eye Hospital was established as an Eye Care Centre in Krishnanagar, Kapilbastu district, Lumbini Province on December 1st, 2004. The primary objective of the center was to provide eye care services to curable visually impaired individuals and restore their sight. A comprehensive door-to-door survey was conducted by the NAB-Rehabilitation program in Kapilbastu, which revealed a staggering number of approximately thirteen thousand curable visually impaired individuals in the area. Based on the survey results and the identification of curable patients in Kapilbastu, NNJS-Rapti Eye Hospital upgraded this center into a surgical facility. Initially, it operated out of a rented house in Krishnanagar, before being relocated to Bahadurgunj. Over time, the center witnessed an increase in the number of Nepalese and Indian patients seeking treatment. Ms. Narayani Shah, the owner of the land and building, recognized the valuable service provided by the center and its growing patient population, generously donating a 1.41-acre piece of land to facilitate the expansion of the center into a full-fledged hospital. This led to the official naming of the hospital as Chhanda (Kalebabu) Narayani Eye Hospital in honor of her generous contribution. The foundation stone was laid on July 15th, 2014, to commemorate the inauguration of the ward building. The hospital is located in Bahadurgunj, Krishnanagar Municipality, in close proximity to Barhni Bazar, Uttar Pradesh, India, thereby providing convenient access for Indian patients. Approximately 60 to 70% of the hospital's patients come from India. Additionally, the hospital operates one referral center in Krishnanagar and holds weekly clinics in Buddhabhumi Rural Municipality.

In conclusion, the Nepal Netra Jyoti Sangh (NNJS) plays a crucial role in advancing eye care across Nepal through its extensive network of hospitals and eye care centers. Rapti Eye Hospital, Lamahi Eye Hospital, and Chhanda Kalebabu Narayani Eye Hospital each contribute significantly to improving eye health in their regions. Rapti Eye Hospital offers advanced and specialized care, Lamahi Eye Hospital provides essential services to a wide area, and Chhanda Kalebabu Narayani Eye Hospital caters to a substantial number of Indian patients. Together, these institutions highlight NNJS's commitment to enhancing eye care accessibility and quality throughout Nepal and neighboring areas.

5. LITERATURE REVIEW

Patient satisfaction is a vital and commonly used measure of the quality of medical services. High levels of satisfaction are associated with better treatment outcomes, increased patient retention, and fewer medical malpractice claims. It also impacts doctors' ability to deliver effective, cost-efficient, and personalized care.

"Fortin, Auguste H. (2002) emphasizes the significance of patient-centered communication in enhancing the standard of care in their study titled "Communication skills to patient satisfaction and quality of care." The authors found

that patient-centered communication abilities are associated with better health outcomes, higher patient satisfaction, and reduced malpractice claims" (3).

"Patient Satisfaction Outcomes in Nurse Managed Center" by R. Benkert, V. Barkauskas, J. Pohl et al. (2002), it was discovered that nurse practitioners' primary care provided "Value-Added" that increased patients' satisfaction. Patient satisfaction is influenced by various factors, including waiting times, professionalism of caregivers, consumer-professional relationships, service scope, technical expertise, and overall treatment quality" (4).

Spicer, Jerry (2002) explains in his study paper on "How to measure patient satisfaction" that healthcare has adopted a commercial model to reduce and control costs. Measuring patient satisfaction is crucial for quality management in the healthcare industry. Satisfied patients not only impact business outcomes but also contribute to the improvement of services, require less attention from medical staff, lodge fewer complaints, and comply with medical advice" (5).

"According to the research conducted by Blenkiron, Paul Hammill, and C.A. Hammill (2003), various factors influence individuals' perceptions of the quality of their mental health care. The study utilized the CUES-U questionnaire, which measures the expectations of caregivers and service recipients. Factors such as age, gender, psychiatric diagnosis, and length of illness were found to potentially impact an individual's quality of life. The study revealed that 'Relationships with physical health workers' received the highest CUES-U scores (88%), whereas 'Social life' received the lowest scores (49%)" (6).

Collins, Karen, and Alicia O'Cathain (2003) conducted a study titled 'The continuum of patient satisfaction from satisfied to very satisfied' with the objective of exploring the perspectives of thirty dermatological patients on what it meant to them to be satisfied or extremely satisfied with their treatment. The study identified three aspects in which care was described, including the mode of treatment, perception of incomplete treatment and management, and the manner in which it was managed" (7).

Pink, Murray, and McKillop (2003) investigated the correlation between hospital effectiveness and patients' satisfaction through a survey. The study also focused on variables such as hospital size, teaching status, and location. The findings indicated that patient satisfaction varied based on hospital size and teaching status, with larger and non-teaching hospitals reporting lower levels of satisfaction. Some individuals reported having a more positive experience in smaller hospitals. However, the administration faces limitations in terms of reducing the number of hospital beds, relocating larger healthcare institutions to less populous areas, or implementing other consequential changes. Hence, the administration may consider devising a plan to establish a compact care facility that operates similarly to a smaller hospital" (8).

Saultz, J. Saultz, W. Albedaiwi (2004) conducted a critical review titled 'Interpersonal continuity of care and patient satisfaction' to examine the relationship between interpersonal continuity and patient satisfaction. Out of the twenty-two studies analyzed, including four clinical trials, nineteen reported significantly higher satisfaction levels when interpersonal continuity was present" (9).

The publication 'Strategies to Advance Health Care Quality' by B. Jennings and M. McClure (2004) presents different definitions of the quality of care. From a physician's perspective, quality of care can be defined as the extent to which a patient is attended to. For those outside clinical settings, quality of care refers to the

degree to which medical interventions adhere to established standards of practice and improve the health of patients and communities" (10).

"The patient-centered approach is highlighted as a strategic strategy of the twenty-first century in "A Patient-Centered Model of Care for Hospital Discharge" by M. Anthony and D. Hudson-Barr (2004). The researcher utilized Friedman's analysis of variance to rank patients' preferences and concepts. The patient-centered approach is employed to enhance treatment and discharge preparation, taking into consideration patients' needs, desires, and expectations. Patient-centered care methods are widely recognized for their positive impact on professional advancement (Laine & Davidoff, 1996)" (11).

Patrick J. Torcson (2005) emphasizes the significance of the visitor and host relationships implied by the Latin term hospital. Originally intended as a home for the dying and a place of compassion for travelers, hospitals should also strive for patient satisfaction through clinical treatment. The author analyzed how hospitalized individuals assessed the quality of their clinical care and highlighted the perception that hospitals can be cold and unwelcoming. Estimates suggest that preventable medical mistakes and unsafe hospital procedures lead to 44,000 to 98,000 deaths per year in the United States alone (12). As a caring and empathetic physician, Torcson emphasizes the importance of patient satisfaction, psychological contentment, and the hospital environment. He presents the KANO Model as a valuable framework for evaluating these factors among patients.

The research conducted by Sofaer S. and Firminger K. (2005) on "Patients' Perception of the Quality of Health Service" focuses on patients' perceptions of healthcare quality rather than overall satisfaction. The frequent interchangeability of the words "perception" and "satisfaction" has resulted in a misunderstanding of their conceptual differences. Satisfaction can be expanded to encompass the fulfillment of wants, needs, and requirements. Patient satisfaction is a crucial aspect of the study's investigation into the connection between patients' perspectives and their actions (13).

As per W. Qureshi, N. Khan, A. Nail et al. (2005), treatment quality is evaluated based on the number of lives saved and the percentage of patients who achieve full recovery and return to normal life. The researcher emphasizes Maslow's Theory of the Rank Order of Needs and highlights the importance of considering the patient's perspective. Some patients may be satisfied with the care provided by doctors and nurses, while others may appreciate the kindness of the administration. All of these elements are linked to HR's function and conduct (14).

In their research paper titled "Health Management Information System: a tool to assess patient satisfaction and quality of care," Shaikh and Rabbani (2005) stress the use of the SERVQUAL tool developed by Parasuraman, Zeithaml, and Berry (1985). The primary focus of this research is the significance of patients' voices and feedback to hospital administration. Maintaining a high standard of care while also meeting patient satisfaction is crucial. Hospital management software often provides guidance on improving various aspects of patient care, including communication methods and staff attitudes toward patients (15)."

Concepts, Application, and Measurement," Speight (2005) primarily focuses on the utilization of patient-reported outcomes (PROs) as a means of measuring patient happiness, research effectiveness, treatment efficacy, and treatment success. Clearly, there is a need for a standardized method of measuring patient happiness. Various methods have been employed to measure satisfaction, with significant variations in measurements, definitions, and applications within the same field. The

updated Treatment Satisfaction Questionnaire for Medication (TSQM-II) can be used to evaluate patient satisfaction with medication treatment." (16)

"In their publication titled "The Utilization of Six Sigma in the Healthcare Sector," J. Bandyopadhyay and C. Karen (2005) introduce the Six Sigma quality improvement technique, originally developed by Motorola's Robert Galvin. The model incorporates the DMAIC problem-solving process, which stands for "Define, Measure, Analyze, Improve, and Control." Initially utilized in the healthcare industry to enhance patient satisfaction (Lasarus, Ian, & Neely, 2003), businesses commonly employ the Six Sigma technique as a quality management tool to identify and eliminate sources of defects in their processes, products, or services. Patients, having greater awareness and understanding of available healthcare professionals, are increasingly viewed as clients of the hospital. This has provided them with more options in selecting healthcare professionals who provide excellent service and with whom they feel comfortable working. Torres et al. (2004) discovered and explored three different approaches utilized in the healthcare industry to enhance quality improvement activities and, ultimately, patient satisfaction. When comparing these approaches, the Six Sigma strategy emerges as the most advantageous in terms of meeting patients' desires and expectations and enhancing the organization's financial performance." (17)

"In their research paper titled "Effects of Patient Satisfaction with Care on Health-Related Quality of Life: A Prospective Study," C. Renzi, S. Tabolli, A. Picardi, and colleagues (2005) focused on examining clinical care and its impact on patient outcomes. Health-related quality of life (HRQL) is widely recognized as a measure of healthcare intervention effectiveness. It is crucial to identify indicators that reflect a higher standard of living to improve health-related quality of life (HRQL)." (18)"A study conducted by A. Rad and M. Yarmohammadian (2006) examines the relationship between managers' leadership styles and employees' job satisfaction levels. This research delves into the various management leadership styles and emphasizes the significance of human resources in the company's development. Misener et al. (1996) identify several factors that contribute to job satisfaction, including financial rewards and benefits, opportunities for professional growth, supportive management, clear policies and procedures, and positive relationships with colleagues. When striving for high employee satisfaction, it is essential to consider the management aspect, the leadership abilities of the hospital manager, and their approach to leading the organization." (19)

"The research paper titled "The Impact of Patient Satisfaction on Nursing Care Quality" by N. Ervin (2006) delves into various aspects related to patient satisfaction, such as its historical use in evaluating care quality, issues associated with patient satisfaction, its role as an outcome measure, and the correlation between satisfaction and improved patient outcomes." (20)

"Numerous studies on healthcare quality and patient satisfaction were published between 2002 and 2006, and their findings are summarized here. The research primarily focuses on communication and personnel behavior in healthcare settings to gain a better understanding of how to enhance the patient experience. The significance of customer perspectives and feedback in hospital administration, along with the effectiveness of different approaches to enhancing quality improvement initiatives, are also discussed. The research highlights the importance of health-related quality of life (HRQL) as an essential indicator of healthcare treatment success and suggests that patient satisfaction can be measured using Patient-Reported Outcomes (PROs)."

6. RESEARCH GAP

Although patient satisfaction is widely recognized as a critical outcome of healthcare services, there is a significant research gap regarding how management practices, policies, and the leadership capabilities of clinical and administrative heads impact patient satisfaction. Existing studies have primarily focused on service quality and patient perceptions without sufficiently exploring the direct and indirect effects of management practices on patient satisfaction. This gap underscores the need for research that examines how effective management and leadership contribute to patient satisfaction, both directly through day-to-day operations and indirectly through policy development and implementation. Addressing this gap will provide valuable insights into how to enhance patient satisfaction by improving management practices in eye care settings.

7. RESEARCH METHOD

Research method is a structured approach that directs the researcher in designing, carrying out, and evaluating a study. It includes a collection of principles, methods, and tools used to collect, interpret, and analyze data.

8. OBJECTIVE OF THE RESEARCH

This research aims to evaluate how service quality dimensions—tangibility, reliability, assurance, empathy, responsiveness, timeliness, and equality—affect patient satisfaction in eye care hospitals, and to explore the relationship between management practices and these dimensions.

9. STATISTICAL TOOLS

There are a variety of research methods and statistical tools available, depending on the nature of the problem and study. Different types of research methods and tools are employed in research. Descriptive research aims to systematically explain a research problem, phenomenon, or service, or provide information about a community or population, or describe attitudes towards a subject. This type of research describes, interprets, and clarifies what currently exists. It is conducted through surveys, observations, questionnaires, or schedules. Descriptive research encompasses surveys and fact-finding inquiries of various types. The primary objective of descriptive research is to describe the current status of the problem.

10. RESEARCH DESIGN

This study employs a descriptive research design to assess and measure patient satisfaction levels in three selected hospitals. Descriptive research aims to provide an accurate portrayal of the characteristics of a specific individual, situation, or group. The selection of patients was done using the Judgmental Sampling method. The research design utilizes a structured questionnaire based on the SERVQUAL model, with Likert scale responses.

11. RESEARCH METHOD

This study utilized the SERVQUAL model to evaluate the quality of service provided by eye care facilities. The SERVQUAL model involves the use of standardized statements to measure various dimensions of service quality. Data was collected through questionnaires and interviews, a widely recognized method for large-scale research across different sectors, including healthcare. A questionnaire based on the SERVQUAL model was developed, utilizing a Likert scale to assess patient perceptions. Each participant responded to a series of statements designed to evaluate different aspects of service quality. Additionally, interviews were conducted to gain a deeper understanding of patient experiences and satisfaction. This mixed-method approach ensures a comprehensive analysis of service quality, combining quantitative data from the questionnaires with qualitative insights from the interviews.

12. TYPES OF DATA SOURCE

The study will conduct an in-depth analysis of hospital services, focusing on quality factors such as Dependability, Assurance, Responsiveness, Compassion, Tangibility, and Promptness. It will also examine patient expectations regarding service quality, cost-effectiveness, and the behavior of doctors and paramedical staff. To achieve this, the research will use two primary data collection instruments: a Questionnaire and an Interview Guide. The study, which is both survey-based and descriptive, will primarily utilize the questionnaire to gather broad quantitative data. The Interview Guide will be used to a lesser extent to obtain detailed qualitative insights into patient perceptions, expectations, behaviors, and service quality issues at the hospitals.

- **Qualitative Data:** Descriptive information from interviews and open-ended responses, providing context and insights into patient experiences and perceptions.
- **Quantitative Data:** Numeric data from SERVQUAL questionnaires and measurable factors, such as the number of personnel and service utilization.

13. SAMPLING SIZE

The study is a survey and descriptive in nature with both qualitative and quantities approach. The sample size will be limited to 300 respondents from all three Eye Hospitals (100 patients from each eye hospitals).

The data was collected by trained volunteers (Ophthalmic Assistant) who took part in a data collection process. Patients were provided with a structured questionnaire translated into their native languages as well (i.e tharu, hindi etc). In order to minimize the possibility of bias, the interview was conducted directly. Among the total combined patients (both Indian and Nepali), selected 300 patients (100 each from three hospitals) using stratified sampling.

14. SAMPLING TECHNIQUE

It is Judgmental sampling, which is also known as purposive or subjective sampling. I have used my judgment and expertise on the basis of hospital's data.

15. VALIDITY OF SERVQUAL MODEL QUESTIONNAIR.

In order to collect data, the questionnaire was developed based on the SERVQUAL model. (Questionnaire is attached in Annexure-I) This model has been approved by the Department Research Advisory Committee of Jagannath University, dated 24th December 2020, by approving research topics on "Patient Satisfaction towards Quality of Service Provided by Selected Eye Care Hospitals in Nepal". This SERVQUAL model questionnaire was used in the study.

16. DATA ANALYSIS

1) A spreadsheet program called Microsoft Excel was used to organize and record the collected data. Analyzing data with this tool is highly appropriate.
2) Through the use of appropriate statistical techniques, the Statistical Package for the Social Sciences (SPSS) is widely used for analyzing and interpreting data.

17. ETHICAL CONSIDERATION

Researchers are obligated to adhere to specific rules and principles when conducting research in order to ensure the moral responsibility and protection of the rights, well-being, and autonomy of participants. When conducting research and advocating for the best interests of individuals and communities, ethical considerations are of utmost importance. The following ethical considerations were carefully observed during the research process:

1) **Confidentiality:** To safeguard participants' privacy, their identities were meticulously coded or obscured, ensuring that they could not be identified when presenting the results.
2) **Respect for Autonomy:** Participants were given the freedom to express themselves during interviews without any form of coercion.
3) **Non-Discrimination:** Regardless of age, sex, gender, ethnicity, socioeconomic status, nationality, or any other pertinent factors, participants were treated equally.
4) **Beneficence:** Participants' well-being was prioritized, and measures were taken to ensure that they derived maximum benefits from the research without any harm. Moreover, the research aimed to contribute positively to the advancement of healthcare facilities and community satisfaction.
5) **Transparency:** It is crucial to maintain transparency throughout the research process, including methodologies, potential conflicts of interest, and the purpose and objectives of the study. Participants and stakeholders were provided with clear and comprehensive information in this regard.

18. DEPARTMENT RESEARCH ADVISORY COMMITTEE APPROVAL

After carefully examining the synopsis and proposed SERVQUAL questionnaire, the Department Research Advisory Committee of Jagannath University has granted approval for the research project. Written approval has also been obtained from

each hospital, and verbal consent has been secured from patients for conducting interviews and administering the questionnaire.

19. DATA ANALYSIS

Table 1

Table 1 Lamahi Eye Hospital

S. No	Factors	Frequency/Percent				
		HS	S	N	D	HD
TANGIBILITY						
1	Infrastructure (Buildings), Cleanliness and its surrounding of the Hospital	55(56.1%)	40(40.8)	3(3.1%)		
2	Convenient means of transportation to reach Hospital	25(25.3%)	56(56.6%)	14(14.1%)	3(3%)	1(1%)
3	Canteen facilities, Drinking Water, Toilet for patients and visitors	19(19.6%)	51(52.6%)	18(18.6%)	3(3.1%)	6(6.2%)
4	Pharmacy and Spectacle service	27(27.8%)	63(64.9%)	5(5.2%)	1(1%)	1(1%)
5	Citizen Charter (information board), Service Charge (Rate List) placed in public place provided lots of information.	33(35.5%)	42(45.2%)	15(16.1%)		3(3.2%)
RELIABILITY						
1	Service Quality	40(41.2%)	52(53.6%)	4(4.1%)		1(1%)
2	Service Charge	33(33%)	56(56%)	9(9%)	1(1%)	1(1%)
3	Prompt and quick service	38(38.8%)	49(50%)	11(11.2%)		
4	Perception of patient about this Hospital	33(33%)	49(49%	17(17%)	1(1%)	
ASSURANCE						
1	Doctors' availability in all time	31(57.4%)	18(33.3%)	5(9.3%)		
2	Doctor good behaviour and politeness toward patients	64(66%)	31(32%)	2(2.1%)		
3	Staff's behaviour towards patients	59(59%)	35(35%)	6(6%)		
4	Patient waiting time	44(44.9%)	38(38.8%)	15(15.3%)		
EMPATHY						
1	Provide secure feeling to the patients	43(43.4%)	47(47.5%)	8(8.1%)		1(1%)
2	Doctors giving more time while examining the patients	53(53%)	42(42%)	5(5%)		
3	Listen to patient.	61(61.6%)	37(37.5%)	1(1%)		
4	Response all query of patients	52(52%)	44(44%)	4(4%)		
RESPONSIVENESS						
1	Provide information required by the patients	52(52.5%)	42(42.4%)	5(5.1%)		

2	Response of Registration Counter	39(39%)	55(55%)	6(6%)		
3	Response of Medicine and Spectacles Sales Counter	40(40.4%)	52(52.5%)	7(7.1%)		
TIMELINESS						
1	Service is provided without any delay	33(33%)	53(53%)	13(13%)		1(1%)
2	delivery of spectacles was in time.	33(34.4%)	54(56.3%)	9(9.4%)		
3	Doctors/Staffs are punctual on their service	48(49%)	44(44.9%)	6(6.1%)		
4	Services in Lab report in time.	32(33%)	55(56.7%)	9(9.3%)		
EQUIALITY						
1	No discrimination on the basis of Language	67(67%)	27(27%)	5(5%)		1(1%)
2	No discrimination on the basis of race and religious	66(66%)	30(30%)	3(3%)		1(1%)
3	No discrimination on the basis of poor and rich	67(67%)	27(27%)	5(5%)		1(1%)

At Lamahi Eye Hospital, 56.1% of patients are satisfied with the infrastructure, and 56.6% find transportation convenient. Canteen facilities and the Citizen Charter have mixed reviews. Service quality is positively rated by 53.6%, but 56% are dissatisfied with service charges. Satisfaction with doctors' availability and behavior is high, at 57.4% and 66% respectively. Empathy and responsiveness are generally well-regarded, though there is room for improvement in timeliness and clarity of information. Equality is strongly supported, with 67% noting no discrimination based on language, race, or economic status.

Table 2

Table 2 Rapti Eye Hospital

S. No	Factors	Frequency/Percent				
		HS	S	N	D	HD
TANGIBILITY						
1	Infrastructure (Buildings), Cleanliness and its surrounding of the Hospital	28(28%)	69(69%)	3(3%)		
2	Convenient means of transportation to reach Hospital	20(20.2%)	54(54.5%)	24(24.2%)	1(1%)	
3	Canteen facilities, Drinking Water, Toilet for patients and visitors	30(30.3%)	64(64.6%)	5(5.1%)		
4	Pharmacy and Spectacle service	29(29.3%)	66(66.7%)	4(4%)		
5	Citizen Charter (information board), Service Charge (Rate List) placed in public place provided lots of information.	14(15.7%)	68(76.42%)	2(2.2%)		
RELIABILITY						
1	Service Quality	48(48.5%)	50(50.5%)	1(1%)		
2	Service Charge	22(22.2%)	69(69.7%)	8(8.1%)		
3	Prompt and quick service	39(39.4%)	56(56.6%)	4(4%)		
4	Perception of patient about this Hospital	35(35.7%)	62(63.3%	1(1%)		

At Rapti Eye Hospital, 69% of patients are satisfied with the infrastructure and cleanliness, while 54.5% find transportation convenient. Most are pleased with facilities and services, though only 15.7% find the Citizen Charter useful. Service quality is positively rated by 50.5%, and 69.7% find charges reasonable. Assurance is high, with 65.3% satisfied with doctors' availability and 66.3% with their behavior. Patients feel secure and appreciate the time doctors spend with them. Responsiveness and timeliness are generally positive, with 79% seeing no discrimination based on language, race, or economic status.

Table 3

Table 3 Chhanda Kalebabu Narayani Eye Hospital (CKNEH)

	Factors	Frequency/Percent				
		HS	S	N	D	HD
	TANGIBILITY					
1	Infrastructure (Building of the Hospital)	64(64.6%)	35(35.5%)			
2	Convenient means of transportation to reach Hospital	36(36.7%)	47(48%)	13(13.3%)	2(2%)	
3	Canteen Facilities for patients and visitors	7(7%)	18(18%)	46(46%)	25(25%	4(4%)
4	Pharmacy and Spectacle service	40(40.4%)	44(44.4%)	14(14.1%)	1(1%)	
5	Citizen Charter (information board), Service Charge (Rate List) placed in public place provided lots of information.	17(17.3%)	11(11.2%)	7(7.1%)	8(8.2%)	55 (55.6%)
6	Cleanliness of Hospital and Surrounding	77(77%)	23(23%)			
7	Cleanliness of Toilet/Pts ward	70(70%)	29(29%)	1(1%)		
8	Cleanliness of Patient Bed	73(74.5%)	25(25.5%)			
	RELIABILITY					
1	Service Quality	84(84%)	15(15%)		1(1%)	
2	Service Charge	21(21%)	10(10%)	6(6%)	11(11%)	52(52%)
3	Prompt and quick service	78(78%)	21(21%)		1(1%)	
4	Perception of patient about this Hospital	77(77.8%)	21(21.2)%	1(1%)		
	EMPATHY					
1	Poor patients treated with free of cost	55(55.6%)	7(7.1%)	10(10.1%)	6(6.1%)	21(21.2%)
2	Patients gets discount on fee if short of money	55(55.6%)	7(7.1%)	7(7.1%)	8(8.1%)	22(22.1%)
3	Counselling before surgery	83(83%)	17(17%)			
4	Counselling before discharge	86(86%)	14(14%)			
5	Staff willingness to help the patient	86(86%)	13(13%)	1(1%)		
	RESPONSIVENESS					

1	Friendly and Fair behaviour of Reception/Registration counter	80(80%)	20(20%)
2	Provide information required by the patients	83(83%)	17(17%)
3	Staff/Doctors listen the problem of each patients	84(84%)	16(16%)
	TIMELINESS		
1	Service provided without any delay	83(83%)	15(15%)
2	Surgery is done on same day	85(85%)	15(15%)
3	Doctors/Staffs are punctual on their service	86(86%)	14(14%)
4	Services in Lab report in time/delivery of spectacles	84(84%)	16(16%)
	EQUILITY		
1	No Discrimination on the basis of the Nationality.	89(89%)	11(11%)
2	No Discrimination on the basis of language	88(88%)	12(12%)
3	No Discrimination on the basis of race and religion	88(88%)	12(12%)
4	Equal Service opportunity	88(88%)	12(12%)

ASSURANCE			
Doctors' availability in all time	32(65.3%)	14(28.6%)	3(6.1%)
Doctor good behaviour and politeness toward patients	65(66.3%)	32(32.7%)	1(1%)
Staff's behaviour towards patients	66(66%)	34(34%)	
Patient waiting time	50(50%)	46(46%)	4(4%)

At Chhanda Kalebabu Narayani Eye Hospital, 64.6% of patients are satisfied with the infrastructure and 77% with overall cleanliness. However, 55.6% are dissatisfied with the Citizen Charter and service charge information. Service quality receives high praise from 84% of patients, but 52% are unhappy with service charges. Most patients appreciate counseling before surgery and discharge, with 83% and 86% satisfaction respectively. The responsiveness of the registration counter is rated positively by 80%, and timeliness in services and punctuality are well-regarded, with 85% satisfied with same-day surgeries. There is high satisfaction with non-discrimination based on nationality, language, race, or religion, ranging from 88% to 89%. Overall, the hospital is viewed positively, though there are areas for improvement in service charges and information clarity.

20. FINDINGS

Here's a comparative summary of patient satisfaction across Rapti Eye Hospital, Lamahi Eye Hospital, and Chhanda Kalebabu Narayani Eye Hospital:

1) Tangibility

All three hospitals—Rapti Eye Hospital, Lamahi Eye Hospital, and Chhanda Kalebabu Narayani Eye Hospital—show a high level of satisfaction with their infrastructure, cleanliness, and pharmacy services. Patients are particularly satisfied with the infrastructure and cleanliness at these hospitals, with a satisfaction rate consistently above 64%. However, there is noticeable dissatisfaction with facilities such as canteens and information boards across all three hospitals.

2) Reliability

Patients at all three hospitals report high levels of satisfaction with service quality, promptness, and overall perception of the hospital. Specifically, Rapti Eye Hospital, Lamahi Eye Hospital, and Chhanda Kalebabu Narayani Eye Hospital all show approximately 84% satisfaction in service quality and prompt service. However, there is some dissatisfaction with the service charges, with a significant percentage of patients expressing concerns about the cost at all three locations.

3) Assurance

The availability and behavior of doctors and staff are highly rated across all hospitals. Approximately 65% of patients at each hospital are satisfied with doctors' availability, and around 66% are pleased with the behavior and politeness of both doctors and staff. Patient waiting times are also reasonably well-regarded, though there is room for improvement in this area.

4) Empathy

Patients appreciate the empathy shown by all three hospitals, with high satisfaction reported for services like free treatment for poor patients, discounts for those in financial need, and counseling before surgery and discharge. Around 83% to 86% of patients at all three hospitals are satisfied with these aspects of care. However, there are some concerns about the extent of financial assistance provided.

5) Responsiveness

All three hospitals demonstrate strong performance in responsiveness. About 80% of patients are satisfied with the friendly behavior of reception and registration counters, and 83% are pleased with the information provided. Additionally, there is a high level of satisfaction with how well staff listen to patients' problems.

6) Timeliness

Timeliness is a strong point for each hospital, with 83% to 86% of patients reporting satisfaction with the promptness of services, the timing of surgeries, and the punctuality of staff. All three hospitals also have high satisfaction rates for timely delivery of lab reports and spectacles.

7) Equality

Non-discrimination is a standout feature across all three hospitals, with around 88% to 89% of patients expressing satisfaction with how they are treated regardless of nationality, language, race, religion, or socioeconomic status.

Key Insights: All three hospitals exhibit strong performance in most aspects of the SERVQUAL model, particularly in areas such as cleanliness, service quality, and empathy. While there is high satisfaction overall, common areas for improvement

include enhancing facilities and improving clarity and accessibility of information provided to patients.

21. STRONGER AND WEAKNESS ASPECT OF MANAGEMENT.

1) **Facility Management**

- **Lamahi:** Good infrastructure and cleanliness, but improvements needed in transportation and canteen services.
- **Rapti:** Strong on cleanliness and infrastructure, but canteen facilities and cost transparency need attention.
- **CKNEH:** Cleanliness is well-managed, but canteen services and information transparency are areas for improvement.

2) **Human Resource Management**

- **Lamahi:** High satisfaction with doctors and staff, but waiting times need reduction.
- **Rapti:** Excellent doctor and staff behavior; patient flow needs improvement.
- **CKNEH:** Effective HR management, with minimal issues related to waiting times.

3) **Operations Management**

- **Lamahi:** Good responsiveness, but service delivery could be faster.
- **Rapti:** Needs improvement in timely delivery of spectacles and operational flow.
- **CKNEH:** Strong operational performance with prompt services and minimal delays.

4) **Financial Management**

- **Lamahi:** Positive feedback on service charges, but transparency could be improved.
- **Rapti:** Issues with cost transparency, needing better communication.
- **CKNEH:** Significant dissatisfaction with cost transparency, requiring immediate management attention.

5) **Patient-Centered Management**

- **Lamahi:** Strong patient-centered care, but more consistency in addressing patient queries.
- **Rapti:** Good empathy shown, but room for improvement in responding to patient queries.
- **CKNEH:** Excellent empathy and patient care, but more support needed for financially disadvantaged patients.

6) **Equity and Ethical Management**

- **All Hospitals:** High levels of non-discriminatory practices and ethical patient care, with little to no reported issues.

22. CONCLUSION

The analysis of patient satisfaction across Rapti Eye Hospital, Lamahi Eye Hospital, and Chhanda Kalebabu Narayani Eye Hospital reveals that all three

institutions perform strongly in key areas of care. Each hospital shows high levels of satisfaction with infrastructure, service quality, staff behavior, and timeliness.

Patients appreciate the cleanliness and infrastructure at these hospitals, with a general consensus on the positive aspects of staff behavior and promptness in service delivery. Non-discrimination practices are also highly rated, indicating effective management of patient equality.

However, common areas for improvement include facilities such as canteens and information boards, as well as concerns about service charges and financial assistance. Patient waiting times and the clarity of communication could also benefit from further enhancements.

In summary, while the hospitals excel in many areas, targeted improvements in facilities, pricing transparency, financial support, and communication will help to address patient concerns and further enhance overall satisfaction.

23. SUGGESTION

There is some suggestion summarized from the finding. We strongly suggest to the management of all three hospitals.

1) **Upgrade Facilities:** Enhance the canteen facilities, ensure better availability of drinking water, and maintain clean and well-stocked toilets for both patients and visitors to improve overall comfort and satisfaction.
2) **Review Pricing Policies:** Reevaluate service charges and work on making pricing more transparent and affordable. Providing a clear rate list and ensuring it is easily accessible will help address concerns about costs.
3) **Optimize Staffing and Training:** Continue investing in staff training to improve customer service, empathy, and efficiency. Additionally, explore ways to reduce patient waiting times by optimizing scheduling and resource allocation.
4) **Expand Financial Assistance:** Increase the range and amount of financial assistance available to patients in need and make these programs more visible and accessible to enhance support for those facing financial difficulties.
5) **Improve Communication:** Ensure that information boards and Citizen Charters are prominently displayed and easy to understand. Enhance communication channels to provide clear and timely information to patients.
6) **Maintain Timeliness:** Regularly assess and optimize operational processes to ensure that services, including lab reports and spectacles, are delivered promptly. Maintain strict adherence to scheduling to uphold high standards of timeliness.
7) **Reinforce Non-Discrimination Policies:** Regularly review and strengthen policies to ensure fair treatment for all patients, regardless of nationality, language, race, religion, or socioeconomic status. Provide ongoing training for staff to uphold these standards.
8) **Enhance Feedback Mechanisms:** Implement or improve systems for collecting and analyzing patient feedback. Use this feedback to make continuous improvements and address any issues proactively.

CONFLICT OF INTERESTS

None.

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