A Report on Patient Feedback Analysis at City Based Hospital Kolkata

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OBJECTIVE OF THE STUDY

Assess patient satisfaction –
- ✓ Evaluate patients' perceptions of various hospital services such as admission, nursing care, cleanliness, food quality, and ward management.

Identify strengths –
- ✓ Highlight areas where the hospital is performing well to maintain and further enhance them.

Detect service gaps –
- ✓ Pinpoint areas where patients experience dissatisfaction or neutral feelings, indicating the need improvement.

Improve patient care quality –
- ✓ Use feedback to guide strategies for better treatment, communication, and overall patient experience.

Support decision-making –
- ✓ Provide hospital management with data-driven insights for policy changes, resource allocation

METHODOLOGY

- ❖ INTRODUCTION
- ➤ Methodologyisawaytosystematicallysolvetheresearchproblem.Itmaybeunderstood as a science of studying how research is done scientifically. In it we study the various steps that are generally adopted by a researcher in studying his research problem along with the logic behind them.

- ➤ SOURCESOF DATA

Data refers to information or facts however it also includes descriptive facts, non-numerical information, qualitative and quantitative information. Data can be broadly classified as- Primary data & Secondary data.

- ➤ PRIMARY DATA

Primary data is the data collected for the first time through observation. It is collected with a set of objectives to assess the current status of any variable studied. Primary data reveals the cross-section picture of the object under scrutiny. Therefore, primary data are those collected by the investigator for research him self for the first tie and thus they are original in character.

- ➤ SECONDARYDATA

Secondary data refers to the information or facts already collected. It is collected with objectiveofunderstandingthepartstatusofanyvariableor thedatacollectedandreportedby some source is accessed and used for the hospital website. Normally in research, scholars collect published data and analyses it in order to establish the relationship between the variables.

- ➤ SOURCES USED IN THE STUDY
  - ➤ PRIMARY DATA:
  - ✓ Department
  - ✓ Questionnaire.

  - ➤ SECONDARYDATA

  - ✓ Company website.
  - ✓ Internet.
  - ✓ Books/Journal.

ANALYSIS OF DATA

Interpretation: This bar chart titled "Patient Feedback – May" compares satisfaction levels across various hospital service areas.
The five feedback categories are color-coded:
Red – Very Satisfied
Orange – Satisfied
Purple – Neutral

Cyan – Dissatisfied
Blue – Very Dissatisfied

❖ Key Observations
1. Highest Positive Feedback
Nursing Services stands out with the most "Very Satisfied" and "Satisfied" responses, especially a large orange bar, indicating strong patient approval.
Doctor's Services and Coordination of Care also have a majority of "Satisfied" or "Very Satisfied" responses.

2. Moderate Performance
Admission Services, Cleanliness, and Insurance Services show a balanced mix of "Satisfied" and "Neutral" responses, with some "Dissatisfied" ratings. These areas may require targeted improvements to shift more patients into the "Very Satisfied" Category.

3. Areas with Noticeable Dissatisfaction
Quality of Food appears to have a relatively higher number of "Neutral" and "Dissatisfied" responses compared to other services.
Facility of Ward also shows a wider spread across all categories, meaning patient experience varies greatly.

4. Lowest Negative Feedback
Doctor's Services and Coordination of Care have very few "Dissatisfied" or "Very Dissatisfied" responses, showing consistent patient trust.

❖ Overall Interpretation
Strengths: Nursing Services, Doctor's Services, Coordination of Care – high satisfaction and low dissatisfaction.
Needs Attention: Quality of Food, Facility of Ward – higher neutral/negative responses suggest room for improvement.
Actionable Insight: Maintain high-performing areas while creating specific quality improvement plans for lower-rated services, especially those with high "Neutral" ratings (which could swing positive with small enhancements).

FEEDBACK STATUS OF MAY
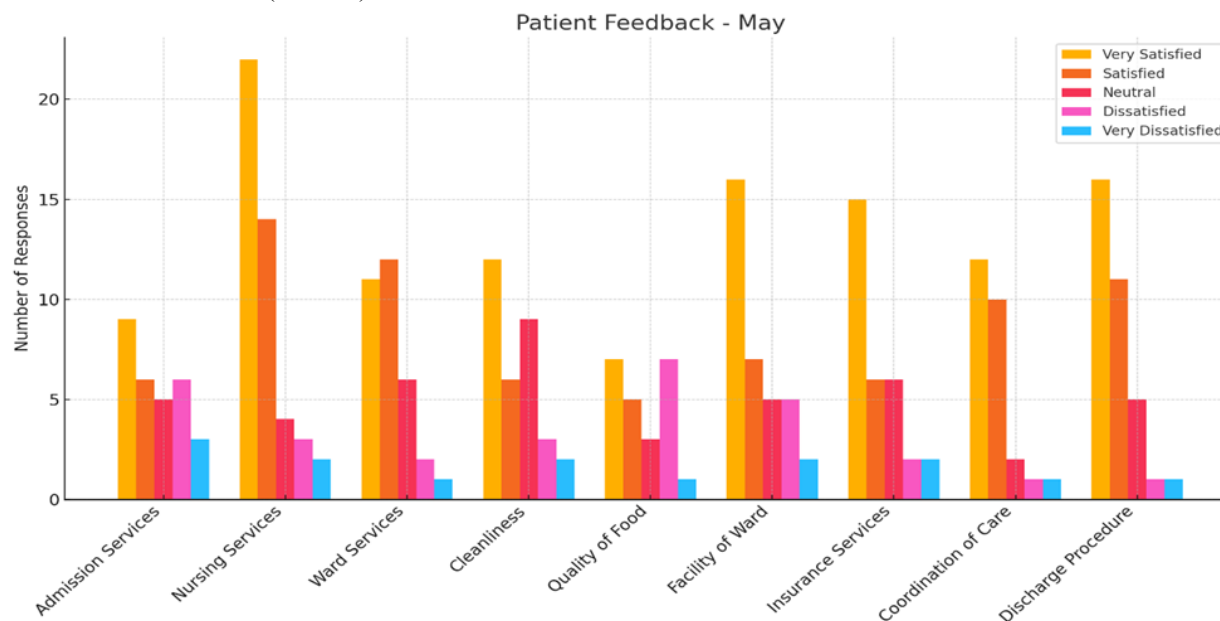300 NOS OF PATIENT (General) FROM 03/05/2025 TO 31/05/2025 5th OLD WARD

Figure 9

Table 1

Services	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Admission Services	9	6	5	6	3

Nursing Services	22	14	4	3	2
Ward Services	11	12	6	2	1
Cleanliness	12	6	9	3	2
Quality of Food	7	5	3	7	1
Facility of ward	16	7	5	5	2
Insurance Services	15	6	6	2	2
Coordination of Care	12	10	2	1	1
Discharge Procedure	16	11	5	1	1
Total	120	90	45	30	15 = 300

Interpretation: The bar chart titled "June Feedback by Service Category (Total Responses: 260)" compares patient satisfaction levels across eight hospital service categories:
1. Admission Services
2. Nursing Services
3. Ward Services
4. Cleanliness
5. Quality of Food
6. Facility of Ward
7. Insurance Services
8. Coordination of Care
9. Discharge Procedure
Each category is divided into five satisfaction levels: Very Satisfied (blue), Satisfied (green), Neutral (yellow), Dissatisfied (orange), and Very Dissatisfied (red).

❖ Key Observations
Highest Positive Feedback:
Nursing Services received the most "Very Satisfied" responses (~16) and "Satisfied" responses (~14), showing strong patient approval.
Insurance Services and Discharge Procedure also have high positive ratings.

Lowest Positive Feedback:
Quality of Food received relatively low "Very Satisfied" responses (~4) and a noticeable number of "Neutral" ratings, indicating room for improvement in meal services.

Moderate Satisfaction:
Ward Services and Cleanliness have a balanced distribution of "Very Satisfied" and "Satisfied" ratings but also notable neutral responses.

High Neutral or Mixed Feedback:
Coordination of Care shows more mixed ratings with fewer "Very Satisfied" responses and a sizable number of "Neutral" ratings.
Facility of Ward also has modest satisfaction scores.

Low Dissatisfaction Overall:
Across all categories, "Dissatisfied" and "Very Dissatisfied" ratings are minimal, suggesting generally good service delivery.

❖ Overall Interpretation
The feedback indicates that Nursing Services is the strongest performing area, followed by Insurance Services and Discharge Procedure. Quality of Food, Coordination of Care, and Facility of Ward appear to be the main areas needing improvement, as they have fewer top ratings and more neutral feedback.

FEEDBACK STATUS OF JUNE
260 NOS OF PATIENT (General) FROM 01/06/2025 TO 30/06/2025 5thOLD WARD
Table 2

Services	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Admission Services	11	10	6	2	1
Nursing Services	17	14	8	3	1
Ward Services	10	6	6	1	1
Cleanliness	13	9	7	2	1
Quality of Food	2	5	3	1	2
Facility of ward	8	8	4	2	1
Insurance Services	9	15	9	1	1

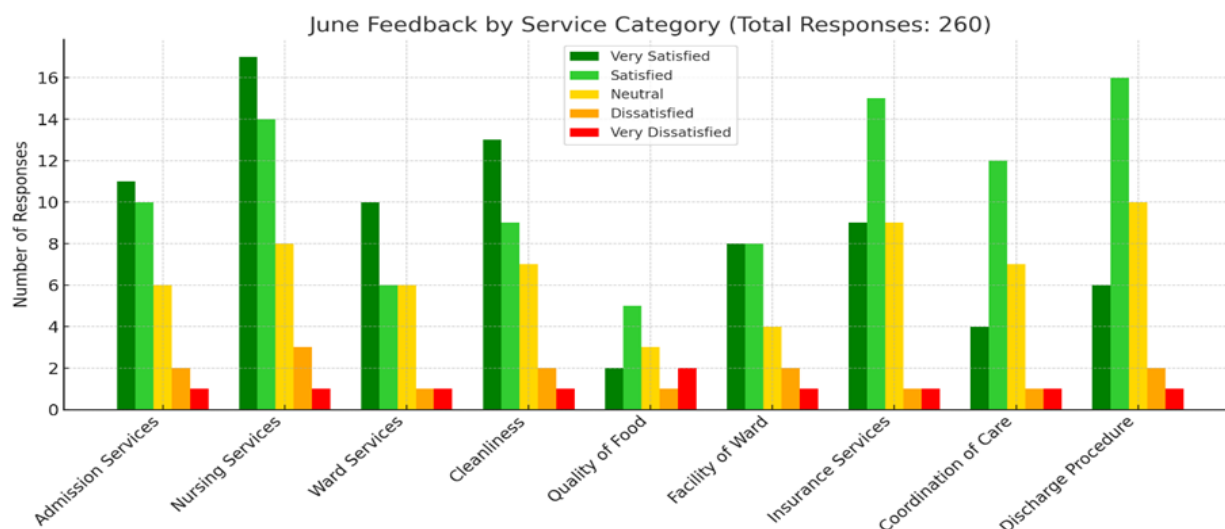| Coordination of Care	4	12	7	1	1
Discharge Procedure	6	16	10	2	1
Total	80	95	60	15	10 = 260

Figure 10

Interpretation: The bar graph presents July Feedback by Service Category based on 320 total responses.

It compares seven hospital service categories— Admission Services, Nursing Services, Ward Services, Cleanliness, Quality of Food, Intensive Services, Coordination of Care, and Discharge Procedure—across five satisfaction levels:

Very Satisfied (dark green)

Satisfied (light green)

Neutral (yellow)

Dissatisfied (orange)

Very Dissatisfied (red)

❖ Key Observations

1. Highest Positive Feedback

Nursing Services and Coordination of Care have the highest combined "Very Satisfied" and "Satisfied" counts, both exceeding 25 responses.

Intensive Services also shows a strong positive trend.

2. Moderate to Mixed Feedback

Admission Services has a majority of positive feedback but a notable share of neutral and dissatisfied responses.

Ward Services shows balanced feedback across positive, neutral, and negative categories.

3. Areas Needing Improvement

Cleanliness and Quality of Food received higher proportions of neutral and dissatisfied responses compared to others.

Discharge Procedure stands out with the highest neutral responses and relatively low "Very Satisfied" ratings, indicating possible process inefficiencies or delays.

4. Negative Feedback

"Very Dissatisfied" responses are minimal across most categories but are slightly more noticeable in Admission Services, Cleanliness, and Quality of Food.

❖ Overall interpretation

The feedback indicates generally high satisfaction in Nursing Services, Coordination of Care, and Intensive Services, while Cleanliness, Quality of Food, and Discharge Procedures require attention for improvement. Positive feedback dominates overall, but service refinement in certain areas could further enhance patient experience.

FEEDBACK STATUS OF JULY

320 NOS OF PATIENT (General) FROM 01/07/2025 TO 31/07/2025 5thOLD WARD

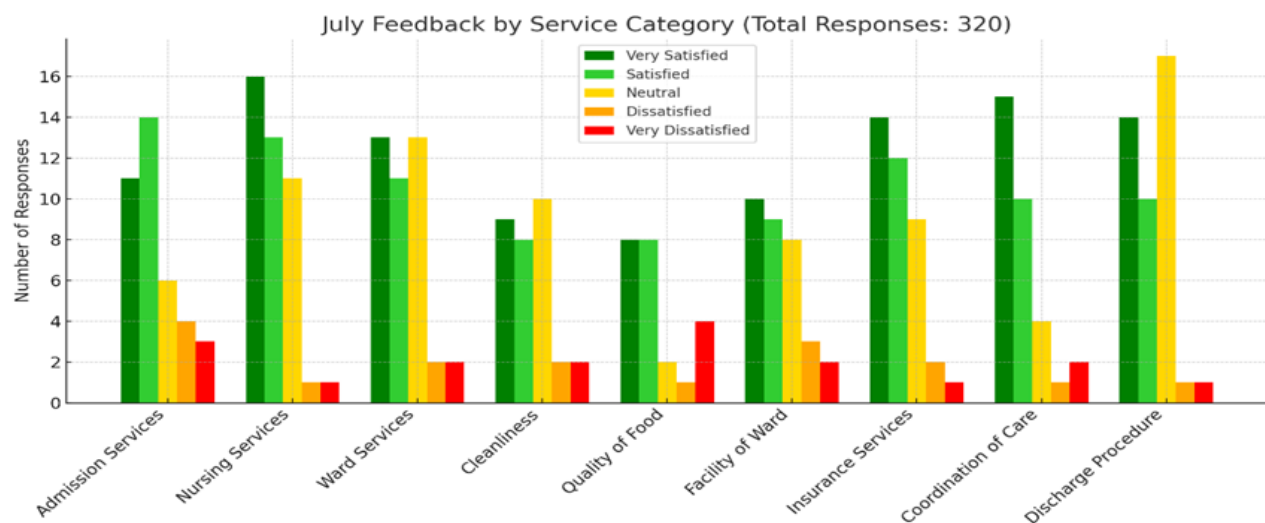| Services	Very Satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Admission Services	11	14	6	4	3
Nursing Services	16	13	11	1	1
Ward Services	13	11	13	2	2
Cleanliness	9	8	10	2	2
Quality of Food	8	8	2	1	4
Facility of ward	10	9	8	3	2
Insurance Services	14	12	9	2	1
Coordination of Care	15	10	4	1	2
Discharge Procedure	14	10	17	1	1
Total	110	95	80	17	18 = 320

Table 3

Figure 11

DISCUSSION&RECOMMENDATIONS

➢ DISCUSSION:
• Nursing Services:
  Most responses were very positive, highlighting compassion, promptness, and professionalism. However, a few noted slow response during peak hours.
• Ward Services:
  Moderate satisfaction overall, with some concerns about availability of amenities and timely bed preparation.
• Cleanliness:
  Mixed feedback—some wards were appreciated for hygiene, but others had complaints about bathroom cleanliness and waste disposal.
• Quality of Food:

This area showed the widest variation in satisfaction. Patients appreciated timely serving but expressed a need for improved taste and variety.

• Admission Services:
  Patients generally expressed satisfaction, but some reported delays in the admission process and paperwork.

➢ RECOMMENDATIONS:
✓ Nursing Staff Shortages sometimes, affecting patient monitoring.

✓ Coordinator staff shortages, need more coordinator for floor.

✓ Real-time feedback helps identify and resolve issues quickly.

✓ NIS and nursing staff are not sufficient as well as there is shortage of wheel chairs.

✓ Change quality of food.

CONCLUSION

The inpatient department is becoming more and more important. Ambulatory care reduces dislocation of work, is cheaper and at the same time gives access to the various investigative and diagnostic facilities of the hospital.

The hospital should have a policy for its inpatient services regarding admission process, discharge process, surgeries, food and cleanliness, VIP patient protocol, and activation of disaster program on the event of disaster, drug distribution system, billing system, contracting system. These are broad guidelines for the IPD administration by the governing board for day-to-day decisions. Analyses of quality information on patient experiences of in patient hospital care should not only take the hospital level, but also at the more specific department level into account.

Patients attending the hospital are responsible for spreading the good image of the hospital and therefore satisfaction of patients attending the hospital is equally important for hospital management. Therefore, it can be concluded that IPD services for man important component of hospital services and feedback of patients are vital in quality improvement.