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A STUDY ON PATIENT SATISFACTION SURVEY IN EYE CARE CENTRE

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Abstract

The study is named "A Study on Patient Satisfaction Survey at an Eye Care Centre". The purpose of the research is to identify the Level of Satisfaction of Services given and Product, among the customer in using Eye Care Centre and consequently to improve the service and goods based on the feedbacks from the respondents. Descriptive study is carried out, questionnaires and interview technique were employed to gather data. The sample size utilised is 60 and is adopted based on convenience sampling approach. It is observed that buyers were happy with whole experience and also with large selection of glasses and contact lenses that is supplied. The satisfactions of few buyers are fewer as their expectations are not met with the quality of eye glasses. Hence the customer expectations have to be determined and matched with the quality of eye glasses. The quality of treatment from staffs (non physicians) should be enhanced.

Key words: Satisfied patients, Eye care facility, Excellent Customer Support, Products' quality, Spectacles for the eyes

Introduction

Patient happiness and loyalty are critical to a healthcare provider's success and survival. The degree to which patients are satisfied or dissatisfied with the level of service they get from the hospital's physicians and personnel is a major determinant of the quality of healthcare provided. Patient satisfaction may be used as a performance indicator to gauge how well hospitals are doing in terms of providing excellent treatment.

Most healthcare practises use questionnaires to gauge patient satisfaction with the quality of their treatment and service. In addition to gathering valuable input from patients, a well-designed survey may assist healthcare

practitioners and staff better communicate with the people they serve.

There are more alternatives for eye care services and eyewear items for patients nowadays, such as corporate optical chains, private eye care offices, online contact lens sellers, and mass merchants. From the time the customer calls to arrange an appointment through the inspection and delivery of their eyewear items, a private practitioner must give a unique experience to compete.

This may be done by constantly monitoring patient happiness and utilising this input to build quality improvement activities that reflect a

dedication to patient-centered care and enhance overall healthcare experience.

The Study's Goals

Ascertain the demographic characteristics of Eye Care Centre customers.

When it comes to Eye Care Center services, how satisfied are customers?

- To find out how satisfied customers are with Eye Care Centre's products
- To make improvements to the service and goods in response to customer input.

Thesis Proposal

Researchers Al-Abri and Al-Balushi (2014) examined the relationship between dependent and independent criteria that impact the improvement of healthcare quality in numerous research studies that developed total patient satisfaction. Keywords and the snowball search approach were two of the strategies employed in this investigation. As a result of this study, interpersonal and communication skills were shown to be more important than technical abilities such as clinical competence and the ability to operate hospital equipment.

Quality in the service business may be gauged by how satisfied customers are with their experiences, according to Williams, B. (1994). A patient's happiness with a service may be expressed in a variety of ways, depending on their views. For the benefit of patients, studies have been carried out to determine how they perceive their care and to assess it.

A survey of patients who had cataract surgery was conducted by Colin, J. et al., (2010). Preoperative consultations were used to recruit participants in a longitudinal research. There were 781 participants in the study. By following up with individuals who had had cataract surgery, data was gathered using questionnaires. The results of the evaluation

revealed that French patients' satisfaction with the treatment they received was met.

Optical chains, private eye care offices, online contact lens stores, and mass merchants are all alternatives for eye care services and eyewear items for patients today, according to Smith et al. (2008). From the moment a customer calls to schedule an appointment through the examination and the care they get while receiving eyewear items, a private practitioner must give a unique experience to compete. Private eye care practitioners must use seven key areas and result-driven strategies in order to provide modified and personalised care and create patients for life, such as convenient and courteous appointment scheduling, check-in and the shopping experience and product delivery and communication between office visits

According to Xie, Z., & Or, C. (2017), the problems were caused by the long wait times for outpatient services. Many people have seen a decrease in patient satisfaction as a result of long waits for appointments. The endocrinology outpatients at a teaching hospital in China were surveyed in a cross-sectional research and questionnaire. Researchers found a link between patient dissatisfaction and the amount of time they had to wait. Human resources, such as personnel, cannot be used to shorten wait times. Patients should be provided accurate information, care personnel should demonstrate respect and empathy, and family members and friends accompanying patients should be treated in a respectful manner.

According to Batbaatar, E et al. (2017), patient satisfaction surveys continue to show conflicting results. As a result of this research, we have been able to refine our theoretical understanding of patient satisfaction and are now ready to put that knowledge into practise. As a consequence, the study's results were not consistent due of a lack of standardisation in the patient satisfaction and measurement systems. Among the many factors that went into determining patient satisfaction, the level of interpersonal care given

by healthcare personnel was regarded as being the most critical. Sociodemographic factors were the most diverse indicator.

Scotto, F et al. (2009) investigated the factors that influence patient satisfaction with a gastroenterology service. A survey of 200 endoscopy patients was used to compile the data. The patient's happiness was impacted by factors such as the cleanliness of the hospital, the comfort of the endoscopy area, and the thoroughness of the endoscopic diagnostic. Quality of patient-physician contact and the organisation of an endoscopy service were shown to be linked to patient satisfaction with this kind of service

According to Shirley, E. et al. (2016), patient satisfaction in the healthcare business is determined by the underlying expectations, which are defined as the logical assessment of the service and the emotional response to it. Qualitative and quantitative methodologies were used in this study's evaluation of the patient satisfaction. This approach of doing qualitative research was only employed throughout the survey's creation. Measurement and comparison of the patient experience was done via the use of quantitative techniques. Knowing how patients perceive hospital strengths and weaknesses may help improve care delivery. To do this, every healthcare worker must know how to assess patient satisfaction and be aware of measurement variances, which can lead to inaccurate data interpretation.

Patients in rural India's Kovai, V et al. (2012) advocated deliberating on the components of vision centres' eye care services based on their perceptions. Patients who visited vision centres were interviewed and their data was gathered using a retrospective research strategy. Factor analysis and linear regression models were used to estimate the correlations between patient satisfaction and outcomes. Factor studies revealed the importance of the technician providing the eye care, as well as the location of the vision centres and the ease of access to these facilities. Patient satisfaction was shown to be influenced not just by the quality of the vision

care provider, but also by variables such as the patient's financial situation and the ease with which they could access the eye care facility.

According to Hawthorne G et al. (2014) the seven aspects of patient satisfaction should be evaluated. This research produced a brief generic patient satisfaction measure for use in clinical practise on a regular basis. A follow-up questionnaire was utilised to gather information from patients, including questions on how satisfied they were with their care. Mokken and Rasch analyses were used to create the Short Assessment of Patient Satisfaction (SAPS) scale. The SAPS scales descriptive system and its strong theoretical model encompass the known aspects of patient satisfaction. The SAPS scale discriminated against lengthier patient satisfaction measures because its internal psychometric features surpassed the normal psychometric norms. Even though it has to be validated, this scale may be used to measure patient satisfaction with healthcare. Patients' pleasure is a key performance metric for providing high-quality medical treatment, as Franklin, J. S. P. (2002) said. Despite the significance of patient satisfaction, there were several theoretical and methodological challenges that led to inconsistent and inadequate definitions of the notion. The research found that sociodemographic factors of patients were a poor predictor of patient satisfaction, but direct experience with the structure, procedure, and clinical results of the treatment received excellent evaluations from patients. A major factor in the evaluation of patient satisfaction was how patients interacted with the medical care system, as shown by the relevance of several aspects of care.

effective and efficient health care services.

Charities' connections with their beneficiaries and their relationship marketing efforts were examined in Bennett & Barkensjo (2005). Although the SERVQUAL instrument was used to test the perceived level of service quality,

previous expectations of the respondent were not taken into account.

According to the findings of the research, the powerful weapon known as relationship marketing may boost beneficiary satisfaction with service delivery as well as the quality of relationships.

Multi-item scale was designed by Tomes A. E., and Chee Peng Ng, S. (1995) to measure the views of service quality of in-patients in NHS or Trust hospitals. It was determined in the research that there are five tangible and two immaterial elements. Relationships of mutual respect, decency and understanding of disease and religious requirements are real aspects. Physical surroundings and food are examples of intangible elements. Patient views meet or exceed expectations in four of the seven factors. Unmet expectations may be based on elements such as "relationship mutual respect" and "knowledge of sickness." As predicted, many also voiced their displeasure with the physical surroundings.

A model to estimate and portray the links between patient emotion, quality of service engagement, and expectations was used by

Helena Vinagre and J. Neves (2008) to characterise the primary aspects that determine patient satisfaction. Health care centres in Portugal were tested with a sample of 317 patients using the SERVQUAL and DESII assessment scales to determine the patient's quality of service and emotional well-being. The findings show that satisfaction with health care services is a multifaceted process that involves a variety of factors. Patient happiness is a major consideration when it comes to increasing service quality. Patients' satisfaction with the level of service they get and their feelings about it. As a result of the model, reliable metrics have been developed.

Methods for doing research This study was conducted in a Chennai eye care centre using a descriptive research methodology. Primary data are gathered via the use of questionnaires and interviews. The number of participants is 60. The method of sampling used is a convenience sampling strategy. Anova one-way and t-test are among the methods used for data analysis.

TABLE NO.1 Analysis of Age level

Age level	Frequency	Percent
less than 18	6	10.0
18-25	16	26.7
26-35	12	20.0
36-45	12	20.0
more than 45	14	23.3
Total	60	100.0

Interpretation

From Table 1 it is found that 26.7% of the consumer belong to age group of 18-25 years and 10% of the consumer belong to less than 18 years. It is clear from the table that majority of consumers belong to age group of 18-25 years.

Analysis of Gender

TABLE NO.2 Analysis of Gender

Interpretation

From the table 2 it is found that 45% of the consumer belong to Male and 55% of the consumer are Female. Hence majority of consumers are females (55%).

Mean Analysis of Overall Eye Examination

TABLE NO.3 Analysis of Overall Eye Examination

S.no	Dimensions of Level of Satisfaction of Service	Mean	Rank
1	It was nice experience overall	4.4500	1
2	Optometrist accommodated to me and adapted to my needs	4.3500	2
3	Optician or specialist operated professionally	4.3333	3
4	Optometrist provided me with all the necessary information	4.3333	3
5	The facilities, equipment and comfort during your visit was up to the expectations	4.3167	5
6	Examination was carried out quickly	4.2000	6

Interpretation:

By examining customer satisfaction scores on several criteria, the table below shows the mean value for total eye exams. With a mean score of 4.45, buyers are most likely to be happy with their whole experience with m1. m6 has the lowest mean score of 4.20, indicating that customers are unsatisfied with the amount of time it takes to conduct an eye test.

TABLE NO.4 Analysis of Level of Satisfaction of Product

S.no	Dimensions of Level of Satisfaction of Product	Mean	Rank
1	Range of spectacles and contact lens we offer	4.2667	1
2	How quickly your new eye wear was produced	4.1333	2
3	Satisfaction with contact lens	4.0769	3
4	How do you rate our pricing plan	4.0167	4
5	Range of accessories available	3.8833	5
6	Satisfaction with eye glasses	3.8667	6

Interpretation:

The table shows the average overall product experience based on the data in the table. In terms of overall satisfaction with the optical's selection of eyeglasses and contact lenses, m1 comes out on top with a mean score of 4.2667. A mean rating of 3.8667 shows that buyers are unsatisfied with eyeglasses, placing m6 in last place.

TABLE NO.5 Analysis of Overall experience with respect to service

Interpretation:

Table 5 shows the average customer satisfaction rating based on service. When it comes to the

TABLE NO.6 Analysis of Gender and Overall Eye Examination

quality of treatment provided by optometrists, customers are more likely to rate m1 and m2 as the best, with a mean rank value of 3.6167. (eye care professional). Quality of care from personnel ranks m4 at the bottom of the list with a mean value of 3.5667, which shows that customers are unsatisfied (Non doctors).

Independent Sample T-test

Analysis of Gender and Overall Eye Examination
Null Hypothesis:

There is no significant difference between the genders with respect to Overall Eye Examination
Alternative Hypothesis:

There is a significant difference between the genders with respect to Overall Eye Examination

S.no	Factors of Services in Eye Examination	T-value	Significant value
1	It was nice experience overall	.737	.813
2	Examination was carried out quickly	1.025	.353
3	Optician or specialist operated professionally	1.106	.433
4	Optometrist accommodated to me and adapted to my needs	.564	.198
5	The facilities, equipment and comfort during your visit was up to the expectations	.906	.397
6	Optometrist provided me with all the necessary information	.365	.160

Interpretation:

A significant value of larger than 0.05 was discovered in Table 6. Overall, there is no significant difference between the sexes for factors 1, 2, 3, 4, 5, and 6 of an eye examination Gender and product analysis

Nonsensical Theory:

In terms of product, there is no substantial variation between the sexes.

When it comes to purchasing products, there is a big gap between men and women.

TABLE NO.7 Analysis of Gender and product

S.no	Product	T-value	Significant value
1	Range of spectacles and contact lens we offer	-1.082	.647
2	Range of accessories available	.272	.875
3	How quickly your new eye wear was produced	-1.150	.161
4	How do you rate our pricing plan	-1.107	.507
5	Satisfaction with eye glasses	1.097	.308
6	Satisfaction with contact lens	1.506	.003

Interpretation:

As can be seen by looking at the table, the factor 6 has a significant value of less than 0.05. Factor 6 satisfaction with contact lenses does not show any significant gender differences.

Factor 1, Factor 2, Factor 3, Factor 4, and Factor 5 have significant values larger than 0.05.

Factor 1, factor 2, factor 3, factor 4, and factor 5 of the goods show no significant gender differences. Gender and service are examined in this paper.

Nonsensical Theory:

Alternative Hypothesis: There is no discernible difference in the quality of service provided by men and women.

When it comes to service, there is a substantial gender gap.

TABLE NO.8 Analysis of Gender and Service

S.no	Service	T-value	Significant value
1	How would you rate communication prior to appointment?	-.301	.650
2	Appointment availability	-.084	.820
3	Quality of care from optometrist (eye care professional)	.568	.578
4	Quality of care from staff (Non doctors)	.304	.763

Interpretation:

A significant value is one with a p-value larger than 0.05, as shown in the table. Factors 1, 2, 3, and 4 of service are not significantly different between men and women.

ANOVA Age and Eye Examination are analysed in a single step.

Nonsensical Theory:

Alternative Hypothesis: There is no discernible variation in overall eye examination results based on age. When it comes to a comprehensive eye exam, the age of the patient makes a big impact.

TABLE NO.9 Analysis of Age Level and Overall Eye Examination

S.no	Overall Eye Examination	F-value	Significant value
1	It was nice experience overall	1.147	.359
2	Examination was carried out quickly	1.398	.187
3	Optician or specialist operated professionally	1.104	.398
4	Optometrist accommodated to me and adapted to my needs	2.298	.014
5	The facilities, equipment and comfort during your visit was up to the expectations	1.622	.100
6	Optometrist provided me with all the necessary information	1.828	.055

Interpretation:

The factor 4 has a significant value of less than 0.05, according to the table. Factor 4 Optometrist adjusted and adapted to the demands of consumers of Overall Eye Examination shows no significant age differences.

There is a significant value larger than 0.05 for each of the factors 1, 2, 3, and 5.

When it comes to Factor 1, Factor 2, Factor 3, Factor 5, and Factor 6, there is no substantial variation in age. Analyses of Products Sold and Age Group

Nonsensical Theory:

There is no statistically significant variation in the goods based on age level. When it comes to items, there is a big disparity in terms of age.

TABLE NO.10 Analysis of Age Level and Products Sold

S.no	Products	F-value	Significant value
1	Range of spectacles and contact lens we offer	1.400	.186
2	Range of accessories available	.870	.648
3	How quickly your new eye wear was produced	1.540	.126
4	How do you rate our pricing plan	1.455	.160
5	Satisfaction with eye glasses	1.218	.301
6	Satisfaction with contact lens	.776	.755

Interpretation:

A significant value is one with a p-value larger than 0.05, as shown in the table. Age doesn't seem to make a difference when it comes to the things offered in factors 1, 2, 3, 4, 5, and 6.

An examination of the age and service status of the participants. Nonsensical Theory: There is no statistically significant variation in service levels based on age. With regards to service, there is a big gap between the ages.

TABLE NO.11 Analysis of Age Level and Service

S.no	Dimensions of Service	F-value	Significant value
1	How would you rate communication prior to appointment?	.898	.616
2	Appointment availability	1.064	.436
3	Quality of care from optometrist (eye care professional)	.952	.555
4	Quality of care from staff (Non doctors)	.754	.778

Interpretation:

From the table, it is discovered that significant value is more than 0.05. There is no significant variation among the age level with regard to factor1, factor 2, factor 3 and factor 4 of service

DISCUSSION

Patient satisfaction plays a vital part in assessing the quality of services delivered in healthcare business. Consumers were found to be happy with their whole experience with regard to service and also with the large selection of glasses and contact lens that are offered consequently, it needs to be maintained. Time carried out to conduct the eye test might be minimized. The satisfaction of few buyers are

less as their expectations are not met with the quality of eye glasses. Hence, the customer expectations needs to be established and matched with the quality of eye glasses. The quality of treatment from staffs (non physicians) should be enhanced. Wide choice of eyeglasses accessories must be made accessible for the customers. Proper pricing strategy should be followed.

Conclusion

In healthcare business happiness of patients is a significant indicator for analyzing the quality of services. Patient satisfaction is assessed based on two criteria: one is based on service quality and the other is connected to communication between the patient and healthcare professionals. However, when this measure of satisfaction is found we may adjust the procedures which are followed in the healthcare businesses and meet the expectations of patients that might ultimately aid in establishing the image of the hospitals. The conclusions of this survey has indicated that the degree of satisfaction with services and eyeglasses items has been satisfactory.

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