



Improving Patient Satisfaction and Reducing Consumer Costs: Policy Recommendations for Sir Salimullah Medical College Mitford Hospital

December 2023

Key Messages:

1. Approximately every 3 in 4 patients (73.82%) received health service spending additional cost.
2. Around one-fifth (18.7%) of patients perceived to pay high additional cost
3. A significant proportion of patients (69.34%) had to buy medicine from outside, while investigation cost outweighs the cost of drugs outside the facility
4. Informal tips were mandatory for accessing service, though physicians and nurses were not accused
5. Around 96.69% (n=614) of respondents failed to get the attention of a doctor to hear about their complaints

Background

The government strives to establish health service standards with measurable customer satisfaction. There is great interest in providing patients with a voice in developed countries. However, in developing nations like Bangladesh, patients need more voice. Studies have been undertaken that have asked clients (patients) for their opinions.

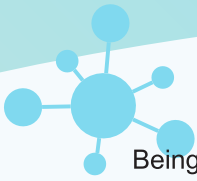
Study findings

This has implications for how healthcare services are ultimately perceived and the extent to which they are used. Patients desire a rapid response from hospital staff during an emergency and often expect medications to be readily available at the facility and provided correctly as additional markers of responsiveness. The client-friendly health service is thus principally based on providers' responsiveness, affordability of service cost, and availability of commodities in the same facility.

Although primary medical care is meant to be provided without charge in public hospitals, consumers frequently pay for their medications, lab investigations, and other hidden costs. Patients are concerned about the level of access to healthcare when determining the availability of doctors, nurses, and hospital beds around the clock.

Patients may also consider perceived treatment costs to be overpriced in addition to service-related issues. There are a certain amount of government fees for comprehensive health care services in any facility. These costs are invariably required for lab tests and are significantly lower than at any private facility. Regardless of income status, service cost remains a constant worry for persons seeking health care services in developing countries, particularly Bangladesh. These expenses are primarily undocumented and generally incurred to skip the queue for consultation, lab tests, medication, and bed allocation.

The government should review the healthcare delivery plan with a concerted focus on patient satisfaction, particularly in minimizing healthcare costs at the facility. Despite several challenges, the government should be more rational when allocating resources from GDP.



Being overworked, doctors often need to be more capable of spending a certain length of time for each consultation, which can set a benchmark for patient satisfaction.

The scarcity of human resources continues to remain one critical challenge for enhanced equipment utilization. There has been a consistently growing patient turnover in any tertiary facility, such as the study site. The prevailing scenario does leave no option for a patient but to pay for investigations outside the facility.

Finally, we would not consider extrapolating the findings to the context of the entire nation because the study was only done in an area of Dhaka City.

Recommendations

- The government should increase resource allocation to curb the out-of-pocket expenditure to purchase drugs from outside facilities. Emergency lifesaving, expensive drug supplies are to be ensured to minimize patient hassle.
- Stringent monitoring and oversight should be in place for appropriate procurement, distribution, and availability of medicine at the facility.
- Strengthening hospital social services is necessary to advance patient welfare and empowerment.
- Increasing the capacity of laboratory investigation in hospitals is crucial for reducing the burden of consumer costs. The number of human resources, logistics, and equipment should be fulfilled according to the increased number of beds in the hospital's expanded form to satisfy the demands of a considerable number of in-patients.
- Service orientation of staff should be a key priority as one of the critical factors influencing patient satisfaction in hospitals. The number of Cleaners should be increased per the increased number of patient beds to ensure patient satisfaction.
- Customized training programs should be in place for healthcare providers to improve cultural awareness and customer service skills to deliver high-quality care and guarantee patient happiness.
- Hospital authorities should create a robust monitoring and assessment cell to prevent fraud and provide informal tips.
- Building institutional capacities by establishing a specialized institution like the Health Technology Assessment Unit/Cell is needed to separate the technical task of determining costs from the more political exercise of negotiating how much to pay for services. Whether an independent entity or designated institution, characteristics of successful systems include political independence, formal methods of communication with stakeholders, and freedom from conflicts of interest. Given finite resources for health, price regulatory systems can be used to promote greater efficiency and attain value for health spending for help from public and private sources.
- In a setting that employs line-item budgets, planning sequenced implementation requires substantial long-term planning to change payment systems, estimate costs, and use prices and payment systems to reach policy goals.
- Establishing prices that approximate the most efficient way of delivering care is necessary. Expenses should match the cost of providing services in the most efficient way that enables quality and health outcomes. This minimizes incentives for inappropriate and low-value care and enables accurate budget projections.
- Regular Costing Exercises can be helpful if they reveal information about the underlying cost structure of service delivery and enable the development of alternative scenarios about models of service delivery that offer high levels of efficiency and quality.
- Using prices to promote value for health spending. Pricing is about covering costs and providing the right incentives.
- Price adjustments are in need to ensure coverage and access, such as health care providers in rural and remote areas.
- Establishing systems of ongoing revision, monitoring, and evaluation. Flexibility is needed to adjust to the evolution of pricing and payment methods, factors outside providers' control, and changes in market structure.