A Study on the Recent Challenges Increase in OPD – An Overview

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Abstract:

This study aims to determine the sociodemographic characteristics of the Outpatient Clinic at the Hospital, to immense satisfaction levels with aspects of patient care, if challenges arise to determine the facts and determine if patient satisfaction levels can be increased by the provision of information letters prior to appointment.

The long waiting time is most crucial problems for private hospitals. Particularly in developing countries, due to inefficient design and limited facilities. This waiting time causes que jumping, focus on VIP, especially in service providing facilities. The outpatient department (OPD) is the first contact of the patients in hospital where handles a large number of patients daily. This research aims to provide solutions for cutdown waiting time in OPD premises through proper planning and organising. This study finds the waiting time of the patients at the OPD. Hospital records and field observations were used to gather data. Further solutions will be applied though identified using the purpose of interviews with the concerned management and a questionnaire survey with patients at OPD. Field observations display that long waiting times at the registration/billing counter and review with the consultant rooms. Due to increased demand for OPD services, walk-in patient, a lack of resources, unorganized flowchart of the patient and patients' ignorance of OPD procedures were identified as causes of overcrowding. The findings of the research mark valuable insights into government hospitals, and the proposed solutions will be useful for hospital management.

Keywords: Significance of OPD, floor management, challenges of the OPD, patient satisfaction

Introduction

OPD is playing the vital role of hospital. Many patients gain their first impression of the hospital from the OPD and thus is also called as the **"shop window" [1]**. It is the first point of contact for patients at the hospital. Healthcare delivery has been towards also called ambulatory care. Outpatient department provides primary care, proper diagnosis, Presurgical and post-surgical treatment, follow up, review checkup, prevention are performed by the healthcare provider. Usually, OPD arranges with various clinical department like cardiology, ENT, Ophthalmology, General physician, Paediatrics, Orthopaedics, Dermatology allows patient to receive care**[2].** Excess loads affecting on the patient satisfaction level and create lots of challenges because of unorganized planning and lack of resources. Easy entrance: Preferable at ground level with parking facility. Closeness matrix: Easy access from OPD, ICU, OT, Radio Imaging, Lab, Pharmacy. As demand patient convoluted increases, lack of efficiency in health care delivery can cause hospital overcrowdings, screaming in floor and service delay. Defects in the OPD process reflects the overall performance of the hospital management. A proper managed, neat and clean hospital can create the positive image for patients and proper intimate to the patient with

necessary information for acquire their satisfaction level. Recommending solutions for reduction of the defects to improve patient care delivery [3].

Source: https://omnivatelehealth.com/blog/opd-transformation-in-healthcare

OPD PROCESS

Aims:

1. To evaluate the services of Out Patient Departments and purpose new approaches to improve the health care system using research**.**

Objectives of Study:

1. To identify problems usually encountered in OPD by patients.
2. To assess the quality of OPD services provided; and apply problem solving methods for quality improvement.
3. To identify the factors those are responsible for high waiting time in the hospitals.

The Significance of OPD Services in Modern Healthcare:

1. **Primary Care and Consultation:** OPD services facilitate access to primary care by offering consultations with experts in a variety specialty including cardiology, neurology, endocrinology, ophthalmology, individual treatment program created to each patient's particular requirements are available [4].
2. **Diagnostic Services:** The Outpatient department is equipped with the state-of-the-art diagnostic equipment, providing and wide range of tests and assessment. These encompasses laboratory analyse, radiographic imaging such as (X Rays, CT scans, MRI Scans, Ultrasound, pathology services. Accurate and prompt diagnostic aid early identification and improved patient outcomes [4].
3. **Minor Surgical Procedures** services include a range of Minor surgical intervention that can be conducted on an outpatient basis. procedure consist activities are biopsies, cyst excisions, endoscopies, and minor joint surgeries. Carrying out this operation in the OPD setting removes hospitalization, aid patients to overcome comfortably at home [5].
4. **Rehabilitation Services:** Departments in OPD provide rehabilitation services focused on enhancing patients physical and functional capabilities. These includes physical therapy, occupational therapy, speech language pathology and various specialized rehabilitation programs. These services are essential for regaining mobility, increasing independence, and improving overall quality of life [5].

Managerial issue in OPD
1. **Huge numbers of Patients and Wait Times issue:** OPDs often experience large patient rush leading to overcrowding and long waiting times.
Affect: Patients may feel dissatisfied, and healthcare professionals feels overstressed and lose their patience [3].
2. **Public relations**: **issue** Here internal public relation is more important. Couple of time have seen the staff lose their temperament during dealing with patient.
Affect: this kind of affirmation during dealing is create negative picture of hospital and does happen more dropout the patient [3].
3. **Low numbers of Resources issue:** Staff shortages, insufficient diagnostic tools, and space constraints can hamper OPD efficiency.
affect: This may lead to delays in diagnosis, rushed consultations, and overworked staff.
4. **OPD timing: issue:** Walk-in patients, missed appointments, and lack of coordination between departments can disrupt daily schedules.
affect: These inefficiencies lead to wasted time and underutilized resources [3].
5. **Lack of Communication issue:** Miscommunication between healthcare providers, staff, and patients often leads to confusion about treatment plans or follow-ups.
affect: This affects patient outcomes and creates inefficiencies in care delivery.
6. **Queue jumping: issue**: The queue jumping is very common practice for VIPs   handling.

affect: Regular appointment patient's witing time increases and they feel is being deprived from the quality treatment**.**

7.   **Absenteeism issue:** Usually concerned consultant comes late or patient get surprised consultant will be not present due to some circumstances.

affect: Mostly old patient those who don't demand the other consultant's treatment they can be quit from the particular hospital **[3].**

8.   **Modern Technology issue:** Many OPDs disruption cause with adopting and effectively using modern technologies like telemedicine and electronic health records

Affect: patient is not treated by reduce error of medical records, and also time taken procedure due to unadopted modern technology [**3**]

The need OPD Transformation be more than vital with in the modern era

▪   **Healthcare Access Anywhere and Everywhere:**

There will be no obstacles to access to healthcare. Even people living in remote areas will be able to access healthcare from their fingertips **[6].**

▪   **Pandemic Preparedness:**

The COVID-19 widespread highlighted the significance of telehealth! It permits for safe and efficient healthcare delivery while mitigate the risk of disease transmission amid episodes **[6].**

▪   **Convenience:**

Everything is available on the web nowadays! Then why not medical personnel? Telehealth makes seeking for restorative wellbeing exceptionally convenient for today's era **[6].**

▪   **Efficient Time Management:**

Both doctors and patients save their waiting time. Only patients who require in-person care visit the hospitals and footfall can be diminished to an enormous percentage **[6].**

▪   **Cost effective:**

Since the footfall is diminished, we need fewer services for the patients and fewer staff and facilities to manage the patients. This directly reduces a lot of costs for the hospitals. This also improves the overall patient experience **[6].**

▪   **Ease for Elderly and Vulnerable Patients:**

Telehealth is valuable for elderly and vulnerable patients who may have trouble traveling to healthcare facilities or hospitals. It helps ensure they receive necessary medical attention and observing **[6].**

▪   **Continuity of Care:**

Telehealth supports continuity of care by enabling patients to maintain their relationships with healthcare providers even when they cannot meet in individual frequently **[6].**

Recommendations:

Implementing proper appointment systems and triage protocols can help prioritize patients based on urgency. Regular resource assessments and investments in technology, such as digital health tools, can optimize workflows. Adopting digital scheduling systems with reminders and real-time updates can streamline the process. Training staff in effective communication those who love talk to patient and make them understand, listen with empathetically. Avoid que jumping basically should make the VIP treatment process. With out fail need to circulate the message related to absenteeism of consultant so patient can immediately know the exact matter before reach the hospital. Effectively use Electronic Health record for keeping the medical record securely and without error can receive the case summary of patient for further requirement or treatment management. Medical practitioner can easily get the previous records of patient history and what will be the action taken against the respective case. In this time teleconsultation increases the patient satisfaction more as they can receive treatment from rural, urban area. This tool will be cost effective for patients. Patient can look after their

child at home other hands consultant can give suggestion stay their home too. Proper trained resources need for maintaining the whole management system and patient will receive the quality treatment.

Conclusion

The main risk factors faced by OPDs are ample number of pre appointment review checkup patients get visit at morning. Basically, for morning is keeping appointed for post-surgical patient for infection control due to management negligence pre appointed patient waiting for long time and creates overcrowding, screaming on the floor. Low number of resources, inadequate infrastructure, inefficient record keeping system, communication gap, inefficiency use of advance technology purpose of healthcare delivery. This kind of negative impact creates dropout the patient, patient dissatisfaction. Apart from the quality of staff, technologies, cleanliness waiting area, comfortable sitting arrangement, sympathy, and understanding shown by the hospital staff and this comes from the efficient management of the OPD services.

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