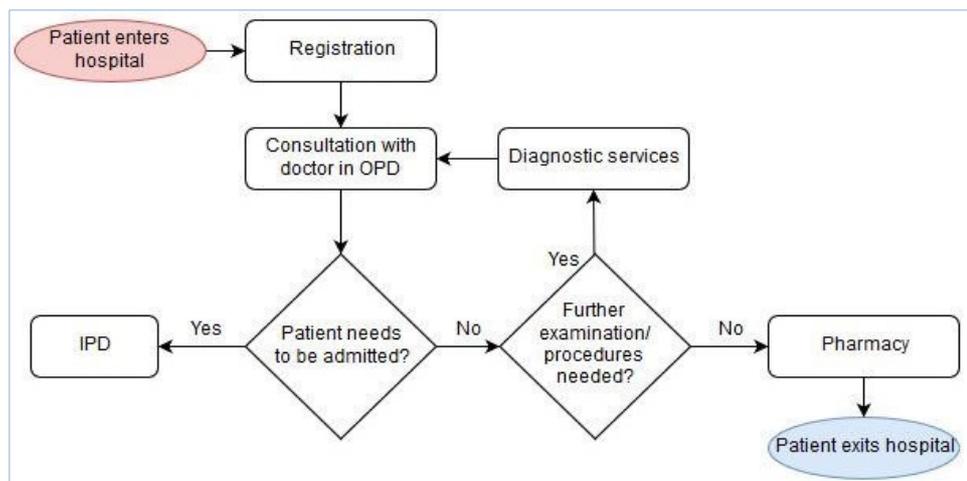


2 Out-Patient Services

To avail Out-Patient Services in the hospitals, out-patients first register at the outdoor patient department (OPD). After registration, the concerned doctors examine the patients and either prescribe diagnostic tests for evidence based diagnosis or drugs, as per the diagnosis done during the consultation process.

Chart 2.1: Flow of out-patient services



This chapter contains audit findings in respect of registration facilities, patient load in OPD, signage (public display sign) system, and grievance redressal in OPD services.

2.1 Out Patient Services

As per IPHS, a DH is expected to provide services grouped in two categories viz., essential and desirable services¹⁰. These services include OPD, Indoor and Emergency services. Essential services under OPD inter alia includes nine services viz., Gynaecology, Paediatrics, Psychiatry, Ear-Nose-Throat, Dental, General Medicine, General Surgery, Ophthalmology and Orthopaedics. Availability of these nine services and emergency services in the six test-checked DHs is shown in **Table 2.1**.

¹⁰ Dermatology and Venereology (Skin & VD), Radiotherapy Allergy De-addiction centre, Physical Medicine and Rehabilitation services, Tobacco Cessation Services, Dialysis Services. Post-Partum Unit with following services in an integrated manner, Post Natal Services, all Family Planning services i.e., Counselling, Tubectomy (Both Laparoscopic and Minilap), NSV, IUCD, OCPs, Condoms, ECPs, Follow up services, Safe Abortion Services and Immunization.

Table 2.1: Out-patient services in District Hospitals

Name of DH	Em	Gy	GM	GS	Oph	Ortho	Pedia	Dental	Psy	ENT
Deoghar	Yes	Yes	Yes	Yes	No	Yes	Yes	Yes	No	No
East Singhbhum	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Hazaribag	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Palamu	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	No
Ramgarh	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Ranchi	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes

(Source: Test-checked District Hospitals)

*Em: Emergency, GY: Gynaecology, GM: General medicine, GS: General surgery, Oph: Ophthalmology, Ortho: Orthopaedics, Paedia: Paediatrics, Psy: Psychiatry, ENT: Ear, Nose and Throat.

It can be seen from **Table 2.1** that Psychiatry and ENT services were not available in four and two DHs respectively out of test-checked six DHs. Audit further noticed that, in DH Deoghar, ophthalmology services were not available since May 2016 due to non-availability of specialist doctor. All test-checked DHs were providing dental services only with one to 27 types¹¹ of equipment out of 34 types prescribed under IPHS.

The Department while accepting (January 2021) non-availability of ENT, Oph. and Psy. OPD services in DH, Deoghar stated that the OPD services is presently available at Medini Rai Medical College Hospital (earlier DH, Palamu). No reply was furnished in respect of DHs Hazaribag, Ramgarh and Ranchi.

2.2 Patient load in OPD

Out-patient services in DHs were provided through OPD clinics run by a doctor on daily basis. The summarised number of patients provided OPD services in the six test-checked DHs during 2014-19 is shown in **Table 2.2**.

Table 2.2: Number of out-patients in test-checked DHs

Year	Deoghar	East Singhbhum	Hazaribag	Palamu	Ramgarh	Ranchi	Total number of out-patients	Increase (YoY) (in per cent)
2014-15	1,26,739	70,245	1,59,329	1,61,224	39,549	2,05,861	7,62,947	Not applicable
2015-16	1,54,781	69,072	1,95,333	1,75,180	36,986	2,33,154	8,64,506	12
2016-17	1,48,891	1,01,029	2,34,328	2,06,685	62,022	2,91,563	10,44,518	21
2017-18	1,36,487	1,14,449	3,06,627	2,19,807	82,287	3,45,408	12,05,065	15
2018-19	1,52,861	1,23,311	3,12,748	2,17,304	91,734	3,00,741	11,98,699	-1

(Source: HMIS data)

It can be seen from **Table 2.2** that the number of out-patients increased by 4,35,752 (57 per cent) in the test-checked DHs in 2018-19 as compared to 2014-15. Audit further noticed that despite increase in the number of patients in OPDs, each OPD clinic was being run by a single doctor leading to increase in patient load per doctor per day which had a cascading effect

¹¹ Deoghar: 15, East Singhbhum: 5, Hazaribag: 7, Palamu: 4, Ramgarh: 1 and Ranchi: 27.

in terms of low consultation time per patient as discussed in **Paragraph 2.3.1.**

The Department while accepting (January 2021) facts of patients load in OPD at DH, Palamu, stated that effective OPD services is in place in DH, Deoghar according to available doctors. The fact is that though the Department claimed existence of effective OPD services in DH, Deoghar, audit observed that the average consultation time in GM department during the month of May 2018 was only 2.38 minutes per patient. No reply was furnished in respect of DHs East Singhbhum, Hazaribag, Ramgarh and Ranchi.

2.3 Evaluation of out-patient services through outcome indicators

NHM Assessor's Guidebook for Quality Assurance provides for evaluation of OPD services through certain outcome indicators. Audit assessment of the quality of out-patient services in test-checked DHs with respect to outcome indicators revealed the following:

2.3.1 Patient load and consultation time at OPD

An efficient and competent OPD, commensurate with the flow of patients, is a must for providing quality health services to patients, particularly poor patients who cannot afford treatment in private hospitals.

The National Institute of Public Finance and Policy had opined that consultation time spent with a doctor is an important attribute to determine satisfaction levels among patients. Longer contact time has been significantly associated with better recognition and handling of physical problems and patient empowerment. Short contact time with the healthcare personnel is a common source of patient's dissatisfaction with the consultation process.

Audit observed that the OPDs were operated for six hours a day but the Department had not fixed standard time for specialist consultation in OPDs. Audit scrutiny of records of sampled months¹² revealed heavy patient load per day per doctor in the six test-checked DHs, especially in general medicine OPD which ranged between 79 and 325 patients per doctor per day. The heavy patient load adversely impacted consultation time which ranged between one and five minutes per patient (*Appendix-2.1*). Besides, in general medicine OPD and gynecology OPD, patient load ranged between 30 and 194 and consultation time between two and 12 minutes. Similarly, in pediatrics OPD, patient load ranged between 20 and 118 and consultation time between three and 18 minutes (*Appendix-2.1*.) Despite high patient load and low consultation time, the concerned DHs did not take action to deploy more than one doctor in these OPDs.

¹² May 2014, August 2015, November 2016, February 2018 and May 2018.

The Department did not furnish replies to the audit observations.

2.4 Registration facility for OPD

Registration counter is the first point of contact with the hospital for a patient. The average daily patient load¹³ per registration counter during 2018-19 (279 working days) in the six test-checked DHs was as shown in **Table 2.3**.

Table 2.3: Average Daily patient load in test-checked DHs

Name of DHs	Number of out- patients during 2018-19	Average daily patient load	Numbers of registration counter
Deoghar	1,52,861	274	2
East Singhbhum	1,23,311	221	2
Hazaribag	3,12,748	560	2
Palamu	2,17,304	389	2
Ramgarh	91,734	329	1
Ranchi	3,00,741	269	4
Total	11,98,699	330	13

During 2018-19, the average daily patient load per registration counter was high in DH, Hazaribag (560) and Palamu (389). Audit further noticed that computerised registration counters were available only in two (East Singhbhum and Ranchi) out of six test-checked DHs. Long queues of patients were observed during physical verification on 06 November 2019 even at DH Ranchi where patient load (269) was comparatively lower and number of registration counters were more.

The Department while accepting (January 2021) non-availability of computerised registration services in DH, Deoghar stated that action is being taken to register patients through computer. No reply was furnished in respect of other test-checked DHs.

2.5 Other basic facilities in OPDs

As per IPHS guidelines, amenities like seating arrangement, potable drinking water, clean toilets and functional fan/cooler for the patients in waiting area are required.

Audit observed absence of suitable seating facility and toilets in OPD areas in three out of six test-checked DHs as shown in **Table 2.4**.

Table 2.4: Non-availability of basic facilities in OPD premises

Facilities	Hospitals with non-availability of the facility
Suitable seating facility	In DH, Ramgarh only six chairs were available for patients against required 20 numbers of chairs as per IPHS. No seating facility was available in DH, Palamu.
Toilets	In DH Palamu, toilet was not available in OPD area.

(Source: Test-checked DHs)

¹³ Number of patients during the year/ number of working days in a year x number of counters

Thus, basic facilities as required were not provided in the concerned DHs. In reply (January 2021), the Department accepted the audit observation.

2.6 Patient rights and grievance redressal

As per IPHS, a Citizen's Charter should be prominently displayed and a grievance redressal mechanism set up in each DH to enable patients to know their rights. Further, grievances of beneficiaries should be redressed on priority basis.

Audit observed that Citizen's Charter was not displayed in two (Deoghar and Palamu) out of six test-checked DHs. Grievance redressal mechanism was available only in two (East Singhbhum and Palamu) DHs. Further, though complaint registers were being maintained for grievance redressal by these DHs, no action was taken on the complaints.

The Department accepted (January 2021) the audit observation and stated that Grievance redressal mechanism would be established at DH, Hazaribag.

To sum up, the substantial increase in the number of out-patients was not accompanied with deployment of adequate number of doctors in OPDs leading to high number of OPD cases per doctor per day. Consequently, the consultation time per patient in the hospitals was less than five minutes for most patients which is directly linked with patient's dissatisfaction with the consultation process. This coupled with lack of basic facilities in OPD premises and absence of proper grievance redressal mechanism indicated inadequate clinical care in OPD.

