

Health Care Satisfaction Among the Hospitalized Patients Coming Under BIJU SWASTHYA KALYAN YOJANA (BSKY) and the Non-BSKY Scheme in Multispecialty Private Hospitals, Odisha

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Abstract:- Health care satisfaction is important for the health status and maintenance of a healthy lifestyle. Patients are more vulnerable to unsatisfied with respect to the care given by the nursing staffs. The present study was under taken to assess the health care satisfaction of the hospitalized patients coming under BSKY and Non-BSKY scheme. A self-structured questionnaires were used to collect data from total 1000 sample by enumerative sampling technique. In this present study about 10% samples were poor level of satisfaction, 66% were average and 24% were good level of satisfaction in BSKY patients. Similarly, 2% samples were poor level of satisfaction, 50% were average and 48% were good level of satisfaction in Non-BSKY patients. In this present study the level of mean & standard deviation of health care satisfaction in BSKY patient were (118±2.38) & non BSKY patient were (116±2.43), the standard error of BSKY patient was 0.055 & non-BSKY patient was 0.061 with the t-value was 8.72 & p value 0.019, which was statistically significant. Thus, it was indicated that there was a significant difference among BSKY patient & non-BSKY patient at 0.05 level of significant. Chi square test (χ^2) explores the association between level of Health care satisfaction in BSKY patients with occupation ($\chi^2=2.046$, $p = 0.008$), type of family ($\chi^2=5.767$, $p = 0.016$) and having knowledge regarding BSKY ($\chi^2=5.767$, $p = 0.016$). And again, the Chi square test (χ^2) explores the association between level of health care satisfaction in non-BSKY patients with annual family income ($\chi^2=1.425$, $p = 0.043$). Further study can be conducted with large samples of different groups of samples with different hospitals to explore the health care satisfaction of patient coming under BSKY Scheme.

Keywords: BSKY, Non-BSKY, Patient, Health Care Satisfaction, Multispeciality.

1. Introduction

Patient satisfaction is a crucial indicator of the quality and effectiveness of healthcare systems globally. It encompasses various dimensions of healthcare delivery, including the quality of nursing care, which is a cornerstone of patient experiences and outcomes. In India, several government-initiated health insurance schemes aim to enhance healthcare accessibility and affordability for economically disadvantaged populations. ⁽¹⁾One such initiative is the Biju Swasthya Kalyan Yojana (BSKY), implemented by the Government of Odisha. ⁽²⁾This study aims to conduct a comparative analysis of patient satisfaction with nursing care between those covered under BSKY and those who are not, shedding light on the scheme's impact on patient experiences. ⁽³⁾

The Biju Swasthya Kalyan Yojana was launched in 2018 to achieve universal health coverage in Odisha. The scheme provides cashless healthcare services up to Rs. 5 lakh per annum for male members and Rs. 10 lakh for female members, covering a wide range of medical treatments and procedures at public and empanelled private hospitals. ⁽⁴⁾By targeting over 70 lakh families, BSKY seeks to alleviate the financial burden of medical expenses, thus improving healthcare access and outcomes for economically vulnerable groups. ^(2, 5)

Nursing care, a fundamental component of healthcare services, significantly influences patient satisfaction. It includes various aspects such as the quality of care, nurse-patient communication, empathy, responsiveness, and overall patient experience. Assessing patient satisfaction with nursing care under BSKY, and comparing it with non-BSKY patients, provides essential insights into the scheme's efficacy and areas for improvement. ⁽⁷⁾

Despite the promising framework of BSKY, there is a notable lack of comprehensive studies focusing on patient satisfaction with nursing care. Current evaluations of BSKY predominantly measure quantitative metrics such as healthcare utilization rates and financial protection. ⁽⁶⁾These studies often overlook patient-reported outcomes, particularly satisfaction with nursing care, which are essential for understanding the overall impact of the scheme. Few studies conduct direct comparisons of patient satisfaction between BSKY beneficiaries and non-BSKY patients. Comparative analyses are crucial to identify the relative advantages and shortcomings of the BSKY scheme in delivering nursing care, thereby providing a comprehensive understanding of its effectiveness. Research on BSKY often lacks the use of validated patient-centric metrics that measure various dimensions of nursing care, such as communication, empathy, and responsiveness. These aspects are vital to understanding overall patient satisfaction but are insufficiently addressed in existing literature.

Limited research has explored the contextual factors and barriers influencing health care satisfaction under BSKY. Factors such as awareness of the scheme, ease of enrolment, and the quality of healthcare facilities significantly affect patient experiences and need to be thoroughly examined. ⁽⁸⁾Few studies have identified satisfaction with the nursing care of patients with BSKY in private hospitals.

2. Objectives

To assess the health care satisfaction of the hospitalized patients coming under BSKY and Non-BSKY regarding the health care services. And to compare the health care satisfaction of the hospitalized patients Coming under BSKY and the non-BSKY scheme.

3. Methodology

The study included quantitative non-experimental comparative survey research design. Before conducting the final study, a Pilot study was conducted for a period of one week from both BSKY and non-BSKY patient from selected Hospital, Bhubaneswar, Odisha. For final study 1000 patients were chosen who were admitted under BSKY and non-BSKY patients in selected private hospitals of khurda district, by using enumerative sampling technique. Data were collected by the researcher by face to face interview. Self-structured questionnaires were used to collect the socio-demographic data & measure the health care satisfaction positively. The data analysed by using SPSS-20 software. The researcher went to the selected Hospital, then the researcher take the formal written permission from the hospital authority. Then the researcher conducted a survey to identify the BSKY

and non-BSKY patients, those patients took as a sample and the self-structured questionnaires provided to the samples to collect the information.

4. Result

Frequency & percentage distribution of participants according socio-demographics variables of BSKY & non-BSKY patients

In this present study, the demographic variables among patients in BSKY of about 4% samples were age group 21-40years and 44% sample were 61-80 years. Similarly, in non- BSKY 4% samples were age group 21-40 years & 50% were 61-80 years. In BSKY about 21% samples were male and 29 %were female, similarly, 19% samples were male and 31% were female in non BSKY patient. About 100.0% samples were Hindu in BSKY patient. & 100.0% samples were Hindu in non BSKY patient. About 44% samples were educated primary and 18% were illiterate in BSKY patients. Similarly, 46% samples were educated primary and 18% were illiterate among non BSKY patients. About 26% samples were self-employed, 6% were private employed, 28% were labour and 34% samples were unemployed in BSKY patients. Similarly, 6% samples were self-employed, 4% were govt employed 68% were private employed, 6% were labor and 16% samples were unemployed in nonBSKY patients.

About 18.0% samples were family income 1 lakh per annual, 2.0% were above 1 lakh per annual, and 80.0% were below 1 lakh per annual family income in BSKY patients. Similarly, 28% samples were 1 lakh family income annually and 72.0% were below 1 lakh per annual family income in non BSKY patients. About 39.0% samples were from nuclear family and 70.0% were from joint family in BSKY patients. Similarly, 6.0% samples were samples were from nuclear family and 94.0% were from joint family in nonBSKY patients. About 8.0% samples were from urban, 42% from rural and 50% were from slum in BSKY patients. Similarly, 14% samples were from urban, 24 from rural and 62% were from slum in BSKY patients. About 93% samples were knowledge and 14% no knowledge on self-satisfaction among BSKY patients. Similarly, that about 76% samples were knowledge and 24% no knowledge on self-satisfaction among non BSKY patients. About 72% samples were knowledge and 14% no knowledge on BSKY among BSKY patients. Similarly, 62% samples were knowledge and 38% no knowledge on non BSKY among patients.

Table 1: Frequency (f) & percentage (%) distribution of level of health care satisfaction among BSKY and non-BSKY patients

N= 1000 (n1=500, n2=500)

LEVEL OF SELF-SATISFACTION	BSKY		NON BSKY	
	Frequency (f)	Percentage (%)	Frequency (f)	Percentage (%)
Poor (0-100)	50	10.0	10	2.0
Average (101-120)	330	66.0	250	50.0
Good (121-200)	120	24.0	240	48.0
Total	500	100.0	500	100.0

The Table 1 presented that about 10% samples were poor level of satisfaction, 66% were average and 24.0% were good level of satisfaction in BSKY patients. Similarly 2% samples were poor level of satisfaction, 50% were average and 48% were good level of satisfaction in BSKY patients.

Table 2: To assess the level of health care satisfaction using unpaired t-test in both BSKY and non-BSKY patients

N= 1000 (n1=500, n2=500)

Group	Mean±SD	SE	t-value	Df	p-value
BSKY	118±2.38	0.055	8.72	98	0.03*
Non-BSKY	116±2.43	0.061			

P ≤ 0.05* = Significant

The table 2 revealed that the health care satisfaction level mean and standard deviation for BSKY patients was (118±2.38), while for non-BSKY patients it was (116±2.43). BSKY patients had a standard error of 0.055 and non-BSKY patients of 0.061, with a t-value of 8.72 at df = 98 and a p value of 0.038, both of which were statistically significant. Thus, it was determined that the research hypothesis was accepted and the null hypothesis was rejected. As a result, at the 0.05 level of significance, it was shown that there was a significant difference between BSKY patients and non-BSKY patients.

Table 3 Chi-square (χ^2) association between the levels of health care satisfaction with selected socio demographic variables in BSKY patient

N= 1000 (n1=500, n2=500)

VARIABLE	BSKY patient			
	Chi-square (χ^2)	Df	p-value	Significant
Age in year 21-40 41-60 61-80	2.009	4	0.925	Not Significant
Gender Male Female	1.507	3	0.785	Not Significant
Religion Hindu Muslim Christian Other	2.065	6	0.529	Not significant
Education Primary Secondary Graduate Post Graduate Illiterate	1.214	8	0.685	Not Significant
Occupation Self employed Govt. employed Private Employed Labour Unemployed	2.046	8	0.008*	Significant

Annual family income 1 lakh Above 1 lakh Below 1lakh	1.956	4	0.090	Not Significant
Type of family Nuclear Joint	5.767	2	0.016*	Significant
Place of residence Urban Rural Slum	3.611	5	0.629	Not Significant
Do you have any knowledge about self-satisfaction Yes No	2.619	1	0.737	Not Significant
Do you have knowledge regarding BSKY Yes No	5.767	1	0.016*	Significant

$P \leq 0.05^* = \text{Significant}$

The table 3 presented that the Chi square test (χ^2) examines the relationship between the degree of health care satisfaction in BSKY patients and their occupation ($\chi^2=2.046$, $p = 0.008$), family type ($\chi^2=5.767$, $p = 0.016$), and level of BSKY knowledge ($\chi^2=5.767$, $p = 0.016$).

Table 4: Chi-square association between the levels of health care satisfaction with selected socio demographic variables in non-BSKY patient

N= 1000 (n1=500, n2=500)

VARIABLE	NON BSKY PATIENT			
	Chi-square (χ^2)	df	p-value	Significant
Age in year 21-40 41-60 61-80	2.850	4	0.326	Not Significant
Gender Male Female	1.014	3	0.602	Not Significant
Religion Hindu Muslim Christian Other	1.838	6	0.821	Not Significant

Education Primary Secondary Graduate Post Graduate Illiterate	1.361	8	0.243	Not Significant
Occupation Self employed Govt. employed Private Employed Labour Unemployed	2.783	8	0.490	Not Significant
Annual family income 1 lakh Above 1 lakh Below 1 lakh	1.425	4	0.043*	Significant
Type of family Nuclear Joint	4.778	2	0.621	Not Significant
Place of residence Urban Rural Slum	1.149	4	0.765	Not Significant
Do you have any knowledge about self-satisfaction Yes No	2.351	1	0.731	Not Significant
Do you have knowledge regarding BSKY Yes No	1.985	1	0.589	Not Significant

$P \leq 0.05^* = \text{Significant}$

The data presented that in Table 4, Chi square test (χ^2) explores the association between level of health care satisfaction in non-BSKY patients with annual family income ($\chi^2=1.425$, $p = 0.043$).

5. Discussion

About 10% of the samples in the current study had poor levels of satisfaction, 66% had average levels, and 24% had good levels of satisfaction among BSKY patients. Comparably, among Non-BSKY patients, 2% of samples had poor levels of satisfaction, 50% had average levels, and 48% had good levels.

Dandsena, 2023 found that 29% younger age group and 25% older age group, where approximately half 45.3% are in a mid-age group (40-60) were enrolled, and from them, 44.8% are in primary education only and 33.2%

have no formal education, with the majority of them being farmers 35.4% by occupation. One-fourth of the population (97% are Hindus) and 93.8% have a household income of less than 20,000, with three-quarters of the population (72.5%) suffering from general disease in the previous six months and the majority of participants (27.5%) suffering from HTN⁽²¹⁾.

The study found that the level of health care satisfaction in BSKY patients was found to be (118 ± 2.38) , while that of non-BSKY patients was (116 ± 2.43) . The t-value was 8.72 at $df = 49$ and p value 0.019, indicating statistical significance. As a result, at the 0.05 level of significance, it was shown that there was a significant difference between BSKY patients and non-BSKY patients.

Study Support by Sarit K. Rout (2021) Public facilities account for 56.8% of outpatient and 72.2% of inpatient visits. The public health system is hampered by a lack of manpower, limited funding, high OOE at the point of care, inaccessible services owing to supply and demand restrictions, and poor care quality⁽³⁾.

In the present study, the Chi square test (χ^2) explores the association between level of self-satisfaction in BSKY patients with occupation ($\chi^2=2.046$, $p = 0.008$), type of family ($\chi^2=5.767$, $p = 0.016$) and having knowledge regarding BSKY ($\chi^2=5.767$, $p = 0.016$). And again, the Chi square test (χ^2) explores the association between level of self-satisfaction in non-BSKY patients with annual family income ($\chi^2=1.425$, $p = 0.043$).

Another study by Sahu, 2022 found that patient happiness promotes improved compliance, continuity of care, and recovery. Clinicians' communication skills, professional competency, and hospital infrastructure all play significant roles in boosting patient satisfaction⁽¹⁰⁾.

The Pearson Chi-square test with a score of 0.000 indicates a degree of less than 5%. A P-value of less than 0.05, that there is a relationship between intoxicant consumption and respondents' financial well-being⁽¹⁸⁾.

6. Conclusion

Biju Swasthya Kalyan Yojana (BSKY) being a flagship scheme of the government there is a strong will and commitment to ensure proper implementation of patient health. It is also helpful for the nurses to provide health education, proper health care to the patient regarding the self-satisfaction and factor affecting the self-satisfaction during the time of hospitalization.

Conflict of Interest

There are no conflict of interest.

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None.

Ethical clearance

This study was ethical approved by Institutional Review Board of SUM Nursing College. Written consent was taken from all participants involved in the study.

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