

# Navigating Patient Satisfaction: A Qualitative Insight into Healthcare Delivery during the COVID-19 Pandemic

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## ABSTRACT

**Introduction:** The Coronavirus Disease-2019 (COVID-19) pandemic has significantly impacted healthcare delivery systems worldwide, necessitating a re-evaluation of patient satisfaction metrics and experiences within this altered landscape. These changes, while ensuring continuity of care, posed unique challenges, including accessibility, technological adaptation and the maintenance of the quality of patient interactions. In addition, healthcare facilities faced immense strain due to resource allocation, workforce shortages and heightened safety protocols. This unprecedented shift underscores the need to explore how these systemic adaptations have influenced patient satisfaction and shaped their overall healthcare experience in a postpandemic context.

**Aim:** To explore the qualitative aspects of patient satisfaction in healthcare delivery during the COVID-19 pandemic, identifying key factors that influenced patient experiences and perceptions.

**Materials and Methods:** A qualitative research design was employed, utilising an in-depth interviews with patients who accessed healthcare services during the pandemic. The study was conducted in New Delhi, India, among COVID-19 survivors during the period of July 2023 to June 2024. Ethical clearance

was obtained from the Institutional Ethics Committee of Amity University (AUUP/IEC/2023/4). Thematic analysis was conducted to identify common themes and insights regarding patient satisfaction. Statistical analysis was performed using the R platform for data visualisation and thematic analysis.

**Results:** The findings revealed several critical themes influencing patient satisfaction, including the accessibility of healthcare services, the quality of communication from healthcare providers, adjustments to telehealth services and the emotional support patients received during their care. Patients expressed both challenges and positive experiences, highlighting the importance of empathy and understanding in healthcare interactions.

**Conclusion:** The study underscores the need for healthcare systems to adapt to evolving patient needs and expectations, particularly in crisis situations like the COVID-19 pandemic. Participants expressed a range of emotions, from frustration to gratitude, highlighting the complexities of navigating healthcare during an unprecedented time. Enhancing communication, increasing accessibility and fostering emotional support are essential strategies to improve patient satisfaction in future healthcare delivery.

**Keywords:** Health personnel attitudes, Health services accessibility, Healthcare delivery, Patient participation, Qualitative research, Telehealth

## INTRODUCTION

The COVID-19 pandemic has profoundly reshaped the landscape of healthcare delivery, presenting extraordinary challenges and opportunities for patient care. As healthcare systems are grappled with the dual imperatives of managing a public health crisis and maintaining quality patient services, understanding patient satisfaction emerged as a critical area of investigation [1]. The pandemic posed significant challenges to healthcare systems worldwide and India was no exception. As one of the most populous countries, India faced a unique set of hurdles in managing the pandemic, exacerbated by existing disparities in healthcare access and infrastructure. The sudden surge in COVID-19 cases overwhelmed hospitals, leading to a critical shortage of medical supplies, healthcare personnel and essential services. The strain on the healthcare system was further magnified by the socio-economic disparities prevalent in the country, which often left marginalised communities with limited access to timely medical care [2].

The government's response included various measures aimed at addressing these challenges, such as increasing the production of medical supplies, enhancing telemedicine services and implementing targeted vaccination drives to reach underserved populations. In addition to the physical challenges of treating COVID-19 patients, the pandemic also introduced psychological stressors for both patients and healthcare providers. Many patients experienced anxiety and uncertainty regarding their health, compounded by fears of contracting the virus in healthcare settings [3].

Healthcare professionals, on the other hand, faced immense pressure to perform under dire conditions, often working long hours with inadequate protective equipment. This dual burden affected the overall quality of care and patient satisfaction, as the healthcare workforce struggled to meet the heightened demands while ensuring patient safety [4]. Moreover, the pandemic necessitated a rapid shift towards telemedicine and digital health solutions, which presented both opportunities and challenges. While these innovations aimed to maintain continuity of care, they also highlighted the digital divide in India, where access to technology and internet connectivity remains uneven [5].

As a result, many patients, particularly in rural areas, faced barriers to receiving care, further complicating their healthcare experiences. While some studies [6,7] indicate that remote healthcare can enhance accessibility and convenience for patients, particularly in urban settings, others highlight the potential alienation felt by those who lack digital literacy or reliable internet access, especially among marginalised groups [8-10].

This dichotomy underscores the importance of not only expanding technological solutions but also integrating comprehensive training and support systems to empower all patients to navigate these new platforms effectively. Additionally, understanding how knowledge and attitudes regarding COVID-19 influence patient experiences is crucial; research suggests that improved awareness correlates positively with patient satisfaction, emphasising the need for targeted educational initiatives within communities [11]. As we analyse

these evolving dynamics, it becomes evident that addressing both technological and informational disparities will be vital in shaping a more inclusive and effective healthcare delivery model postpandemic.

Understanding patient satisfaction during the COVID-19 pandemic is crucial, especially in India, where the healthcare system has experienced significant transformation. Existing studies primarily emphasise public hospitals, identifying factors like hospital image, trust and service innovation as key determinants of patient satisfaction [12]. Research on private hospitals also underscores service quality dimensions, such as reliability and empathy, but lacks qualitative analyses of patient perceptions [13]. Psychological aspects, including stigma and death anxiety, have been documented [14]; however, their integration into patient satisfaction studies in India remains limited. Additionally, healthcare inequities within India's diverse population require attention, as disparities among minority groups have been observed in other regions [15]. While studies on healthcare system resilience during the pandemic exist [16], leveraging patient narratives to enhance resilience and cultural sensitivity in healthcare delivery remains underexplored. Addressing these gaps could inform equitable, responsive and patient-centred healthcare models for future crises.

Keeping these challenges in mind, this study aimed to delve into the qualitative aspects of patient experiences in India's transformed healthcare landscape, capturing their perceptions, concerns and the factors that influenced their satisfaction with the care received during this unprecedented time. By examining these narratives, authors hope to identify key insights that can inform future healthcare delivery models, ensuring that they are more resilient, equitable and responsive to the needs of patients in times of crisis.

## MATERIALS AND METHODS

This qualitative study was undertaken in New Delhi, India, among COVID-19 survivors during the period from July 2023 to June 2024. Ethical clearance was obtained from the Institutional Ethics Committee of Amity University (AUUP/IEC/2023/4). Informed consent was secured from all participants, ensuring they understood the purpose of the study, the voluntary nature of their participation and their right to withdraw at any time. Confidentiality was maintained throughout the research process, with all identifying information anonymised in the final report.

**Inclusion criteria:** The adult patients (aged 18 and above) who were hospitalised for COVID-19 in various healthcare facilities across India and had been discharged for at least one month prior to data collection were included in the study.

**Exclusion criteria:** Participants below the age of 18, those hospitalised for conditions other than COVID-19 and participants who declined to participate were excluded from the study.

**Sample size:** Participants were selected using purposive and iterative sampling and like most qualitative studies, a level of near saturation was reached between 15 to 23 participants. Finally, a sample of 20 (n=20) respondents was chosen to ensure diverse representation in terms of age, gender, socio-economic status and geographical location, including both urban and rural settings [17].

## Study Procedure

Data was collected through semistructured in-depth interviews, which were conducted face-to-face. The interview guide included open-ended questions designed to elicit detailed narratives about the patients' experiences during their hospitalisation, including their perceptions of the quality of care, interactions with healthcare providers, emotional challenges faced and the impact of their illness on daily life postdischarge:

1. Initial symptoms and the decision to seek hospitalisation.
2. Experiences during hospitalisation, including interactions with healthcare staff, access to medical care and emotional wellbeing.

3. Challenges faced during treatment, particularly relating to communication, information access and support systems.
4. Perceptions of the healthcare services received and factors influencing their satisfaction.

Interviews were audio-recorded with participants' consent and lasted approximately 45 to 90 minutes. The audio recordings were transcribed verbatim and qualitative content analysis was employed to analyse the data. The study adhered to ethical principles, including informed consent, confidentiality and anonymity of the respondents.

## STATISTICAL ANALYSIS

Data analysis was conducted using reflexive thematic analysis by two independent coders to ensure the reliability and validity of the findings. The RQDA package within the R platform was used for qualitative analysis, which included data visualisation and thematic analysis.

## RESULTS

There were a total of 20 participants in the study. The mean age of the participants was  $37.7 \pm 10.20$  years (ranging from 22 to 57 years). The findings revealed several key themes that emerged from the participants' experiences, highlighting both positive and negative aspects of their healthcare journey. Based on the information shared by the respondents, the results were categorised into five main themes: (1) Accessibility and availability of healthcare services; (2) Technology and telemedicine experience; (3) Emotional and psychological aspects of healthcare; (4) Safety and hygiene concerns; and (5) Patient empowerment and decision-making. Each theme encapsulated a range of experiences that underscored the complexities of navigating the healthcare system.

### (1) Accessibility and Availability of Healthcare Services

Respondents in the current study expressed a range of opinions regarding the accessibility and availability of healthcare services during the COVID-19 pandemic. Many highlighted the challenges they faced in obtaining timely medical attention, particularly for non COVID-related issues, which often led to delays in treatment and increased anxiety about their health.

As one respondent stated, "I felt like my concerns were pushed aside; it was as if only COVID mattered and I was left to suffer in silence." This sentiment was echoed by others who noted that routine check-ups and preventive care were often postponed, exacerbating existing health conditions and creating a sense of neglect within the system. Many respondents expressed frustration over the lack of communication from healthcare providers, which left them feeling uncertain about when they could safely seek care.

"There are so many disparities in healthcare access, especially based on socio-economic status, with those in lower income facing the greatest insecurities."

### (2) "Technology and Telemedicine Experience"

As a result, many turned to technology and telemedicine as a lifeline, seeking virtual consultations to bridge the gap left by in-person visits. These virtual platforms not only provided immediate access to healthcare professionals but also offered a sense of safety and convenience that many found reassuring during uncertain times.

As one respondent stated, "I felt more comfortable discussing my health issues from home; it was like having a doctor in my pocket." This shift not only transformed the way patients interacted with their providers but also highlighted the potential for technology to address long-standing barriers in healthcare delivery.

Moreover, the integration of artificial intelligence in these platforms has further enhanced the patient experience, allowing for quicker diagnosis and personalised treatment plans that cater to individual needs.

"I do not understand the concept of telemedicine, but I see how it can be beneficial," another participant remarked, emphasising the need for education and awareness to fully embrace this evolving landscape. As more people become familiar with these technologies, the potential for improved health outcomes will only grow, paving the way for a more accessible and efficient healthcare system. This shift not only empowers patients but also alleviates pressure on healthcare providers, enabling them to focus on delivering quality care rather than administrative tasks.

### **(3) "Emotional and Psychological Aspects of Healthcare"**

The integration of mental health support into telemedicine services is crucial, as it addresses the emotional and psychological needs of patients in a holistic manner.

As one of the participants noted, "The ability to connect with a therapist from the comfort of my home has made a significant difference in my overall wellbeing." This sentiment highlights the importance of accessibility in mental healthcare, allowing individuals to seek help without the barriers often associated with traditional in-person visits. Furthermore, the flexibility of scheduling appointments online has empowered patients to prioritise their mental health, fostering a proactive approach to wellness that was previously hindered by logistical challenges.

### **(4) "Safety and Hygiene Concerns"**

This shift towards virtual therapy not only addresses safety concerns but also ensures that individuals can receive support during times of crisis when in-person visits may be less feasible.

As one of the participants stated, "I felt more comfortable discussing my feelings from the safety of my home, which made it easier to open up about my struggles." The study also emphasised that this comfort level can lead to deeper conversations and a more effective therapeutic process.

On the other hand, some respondents were worried about hospital visits due to the potential exposure to illness, which could deter them from seeking necessary care. One respondent, who was also a cancer patient, said, "I knew I was at more risk compared to others as I had low immunity, but I still had to go out to the hospital for my chemo sessions and it was a constant source of anxiety for me. I often found myself weighing the risks against the necessity of treatment, which made each visit feel like a daunting challenge."

### **(5) "Patient Empowerment and Decision-Making"**

The pandemic was one such crisis where neither healthcare professionals nor patients had any prior comprehensive understanding of what would follow and the evolving nature of the virus added layers of uncertainty to an already stressful situation. Many patients felt isolated, grappling with their fears while trying to navigate a system that was rapidly changing.

As one of the respondents said, "I had no choice but to go with what the doctors told me to do, even though I had my doubts. It was hard to trust when everything felt so unpredictable." This sentiment was echoed by many, highlighting the struggle between compliance and personal agency in a time of crisis. Some noted that healthcare professionals themselves had two points of view. While many thought that managing symptoms from home was safer for patients, others believed that in-person visits were essential for proper care, oxygen support, etc. This division created further confusion for patients, who were left to weigh the risks of exposure against the need for medical attention.

Another respondent shared, "The constant changes in guidelines made it nearly impossible to feel secure in any decision, leaving us all feeling like we were navigating a minefield. I was scared to make decisions for my elderly parents and worried that one wrong choice could lead to dire consequences." This uncertainty

was compounded by the overwhelming amount of information circulating online, making it difficult to discern fact from fiction.

## **DISCUSSION**

This qualitative study aimed to explore patients' satisfaction with healthcare delivery during the COVID-19 pandemic. In-depth interviews were used to analyse individuals' hospital experiences during the pandemic, focusing on their perceptions of safety, communication with healthcare providers and the overall quality of care received. Participants expressed a range of emotions, from frustration to gratitude, highlighting the complexities of navigating healthcare during such an unprecedented time.

Five main themes emerged from the research. The first was "accessibility and availability of healthcare services," which was the most important assessment of the level of healthcare delivery during the pandemic. The second theme was "technology and telemedicine experience," which presented both advantages and disadvantages for many. The third theme was "emotional and psychological aspects of healthcare," which would not have been possible to elicit had we not undertaken a qualitative study and conducted in-depth interviews. The fourth theme related to respondents' perceptions regarding "safety and hygiene concerns." The last theme was "patient empowerment and decision-making." These themes collectively highlight the multifaceted challenges and adaptations within the healthcare system.

The findings of this study suggest that healthcare delivery systems were indeed undergoing a major shift during the pandemic and a patient satisfaction survey was essential to gauge the effectiveness of these changes and understand patient experiences more comprehensively. According to the first theme on "accessibility and availability of healthcare services," it became evident that many patients faced significant barriers in accessing necessary care, particularly during lockdowns and restrictions. As noted in the existing literature, these barriers included transportation issues, limited appointment availability and a lack of telehealth options, which disproportionately affected vulnerable populations [18,19]. Additionally, many patients reported feeling neglected or sidelined due to the focus on COVID-19. It becomes essential to consider how future health crises can be managed without compromising care for other medical conditions [3]. Moreover, collaboration between government agencies, private sectors and community organisations will be essential in bridging the digital divide and ensuring that all individuals can benefit from these advancements.

The second theme highlighted the point of "technology and telemedicine experience." In the study, the respondents expressed mixed opinions regarding the adoption of technology and telemedicine. As per the literature, the rapid adoption of telemedicine has not only transformed patient-provider interactions but has also emphasised the need for comprehensive digital literacy programmes that empower all demographics, particularly those in rural areas who may lack access to technology [20]. The disparities highlighted by this pandemic necessitate a re-evaluation of healthcare delivery models to ensure equitable access, which could ultimately lead to improved health outcomes across diverse populations. Thus, fostering an inclusive approach that prioritises both technological advancements and traditional care methods will be pivotal in building resilience within India's healthcare system moving forward [3].

During the evaluation of the third theme, "emotional and psychological aspects of healthcare," the study highlighted that respondents felt more satisfied with the support they received from mental health professionals, indicating a growing recognition of the importance of mental wellbeing in overall health. The pandemic posed a unique situation that was a new and challenging crisis for everyone. Contrary to this study, the literature suggested that the impact of social isolation and anxiety on individuals' mental health became increasingly evident, prompting a surge in demand for accessible



mental health services and resources [3]. Furthermore, addressing the emotional aftermath of COVID-19-particularly among vulnerable populations-requires a comprehensive approach that includes mental health support tailored to individual needs, thereby ensuring that recovery encompasses both physical and psychological dimensions [21].

The fourth theme, based on “safety and hygiene concerns,” showcased that there were multiple opinions among the respondents. While many felt relaxed accessing healthcare from the comfort of their homes, others, especially cancer patients seeking chemotherapy, expressed significant apprehension about visiting healthcare facilities due to fears of exposure to the virus. The literature also supports the notion that the heightened anxiety surrounding potential infection risks led to a decline in routine medical visits, which could have long-term implications for patient outcomes and overall public health [20].

For the fifth theme, “patient empowerment and decision-making,” present study concluded that many respondents were unsure about their doctors’ decisions regarding their treatment plans due to constant updates in guidelines and protocols. The respondents also felt that, due to the immense shortage of hospital beds, oxygen support and general diagnostics, they were often left in the dark about their own health status, which further exacerbated their anxiety and distrust in the healthcare system. Garaix T et al., have shed light on how decision-making processes were influenced by the pandemic’s urgency and the need to address co-existing conditions like frailty. This situation required balancing patient empowerment with clinical guidelines and resource constraints [22]. In another study by Cadel L et al., showed the pandemic exposed gaps in patient engagement, particularly in fostering genuine partnerships. However, it also presented opportunities to enhance patient empowerment through improved use of technology and interprofessional collaboration [23].

The study results have significant implications for healthcare delivery during crises like the COVID-19 pandemic. Barriers to healthcare access, such as transportation and limited appointment availability, emphasise the need for robust contingency plans, consistent with findings by Green J et al., particularly for vulnerable populations [24]. Mixed opinions on telemedicine reflect trends observed by Gajarawala SN and Pelkowski JN, highlighting the importance of digital literacy initiatives and equitable telehealth solutions [25]. The study’s emphasis on mental health aligns with the advocacy by Pfefferbaum B and North CS for integrating mental health services into primary care to address patients’ holistic needs [26]. Lastly, the challenges of patient empowerment, as noted by Garaix T et al., and Cadel L et al., [22,23], stress the importance of transparent communication and shared decision-making to enhance patient engagement during crises.

### Limitation(s)

This study acknowledges potential limitations, including the subjective nature of qualitative research and the possibility of recall bias, as participants were reflecting on their experiences after discharge. Additionally, the reliance on self-reported data may introduce personal biases in how patients perceived their care and satisfaction.

### CONCLUSION(S)

This study has sought to explore the nuances of patient satisfaction during this unprecedented crisis, highlighting the critical interplay between accessibility, technological advancements, emotional wellbeing, safety concerns and patient empowerment. Through qualitative interviews with patients who experienced hospitalisation for COVID-19, the research has illuminated the multifaceted experiences that shaped their perceptions of care during a time marked by uncertainty and rapid change. The findings underscore the importance of addressing systemic disparities in healthcare

access, enhancing digital literacy and integrating mental health support into care models.

Furthermore, the themes identified in this study-ranging from the accessibility of services to the psychological impacts of care-offer valuable insights that can inform future healthcare delivery strategies. By acknowledging and addressing the complexities of patient experiences, healthcare systems can become more resilient, equitable and responsive to the needs of all patients, particularly in times of crisis. This research not only contributes to the understanding of patient satisfaction during the pandemic but also lays the groundwork for ongoing improvements in healthcare delivery that prioritise patient-centred approaches and inclusivity.

The COVID-19 pandemic has highlighted the need for resilient, equitable and patient-centred healthcare systems by emphasising accessibility, digital literacy, mental health integration and addressing systemic disparities, offering valuable insights to shape inclusive and responsive care strategies for future crises.

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**PLAGIARISM CHECKING METHODS:** [Jain H et al.]

- Plagiarism X-checker: Oct 10, 2024
- Manual Googling: Nov 26, 2024
- iThenticate Software: Nov 28, 2024 (11%)

**ETYMOLOGY:** Author Origin**EMENDATIONS:** 6**AUTHOR DECLARATION:**

- Financial or Other Competing Interests: None
- Was Ethics Committee Approval obtained for this study? Yes
- Was informed consent obtained from the subjects involved in the study? Yes
- For any images presented appropriate consent has been obtained from the subjects. NA

Date of Submission: **Oct 08, 2024**Date of Peer Review: **Nov 16, 2024**Date of Acceptance: **Nov 30, 2024**Date of Publishing: **Jan 01, 2025**