

DOI: <https://dx.doi.org/10.18203/2320-1770.ijrcog20260552>

Original Research Article

Assessment of patient satisfaction in obstetric care under the LaQshya program

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Received: 21 December 2025

Revised: 28 January 2026

Accepted: 02 February 2026

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ABSTRACT

Background: Patient satisfaction is a key indicator of healthcare quality, especially in maternity services. The LaQshya program, launched by the Government of India, aims to improve labour room and maternity OT services and ensure respectful maternity care. To assess the effectiveness of the program, study was done to know patient satisfaction with obstetric care among post-delivery women at Government General Hospital, Siddipet.

Methods: A prospective cross-sectional study was conducted over 3 months among 1000 postpartum women who stayed for at least 2 days after delivery. A structured questionnaire assessed socio-demographic profile, communication, birthing satisfaction, staff behaviour, hospital facilities, and overall satisfaction.

Results: Most patients reported satisfaction with communication (90%), intrapartum care (94%), and staff professionalism (94%). Birthing satisfaction was high, with 100% reporting privacy and permission for a birth companion. Hospital infrastructure satisfaction was 81%, cleanliness 85%, and bed availability 93%. Overall, 83% rated services as “good” and 17% as “excellent.” The mean satisfaction score was 92.5%.

Conclusions: Overall patient satisfaction with obstetric services was high, indicating effective implementation of the LaQshya program. Continuous monitoring and targeted interventions can further enhance quality of maternal care.

Keywords: LaQshya program, Maternal healthcare, Obstetric care, Patient satisfaction, Quality, Respectful maternity care

INTRODUCTION

Patient satisfaction is increasingly recognized as an essential indicator of the quality, efficiency, and effectiveness of healthcare services. In obstetric care, satisfaction is linked not only to health outcomes but also to the emotional and psychological well-being of the mother and newborn. Respectful maternity care plays a vital role in promoting positive birth experiences, reducing stress, and enhancing neonatal cognitive outcomes.

The Government of India's LaQshya (labour room quality improvement initiative) aims to reduce maternal and neonatal morbidity and mortality by ensuring high-quality, respectful intrapartum care. As part of ongoing quality

assurance efforts, patient satisfaction surveys serve as crucial tools for identifying gaps and guiding quality improvement.

There is no universal definition of patient satisfaction due to differences in cultural expectations, provider characteristics, and healthcare settings.¹ However, evaluating patient perception of care provides valuable insights into the strengths and weaknesses of healthcare delivery systems.

This study aimed to assess satisfaction levels among postpartum women at Government General Hospital, Siddipet, and identify areas for improvement under the LaQshya framework.

METHODS

Setting

A prospective cross-sectional study was conducted in the obstetrics department of Government General Hospital, Siddipet. The study was conducted from August 2023 to October 2023. A total of 1000 postpartum women were included.

The inclusion criteria were as follows: women who delivered in the hospital, minimum hospital stay of 2 days post-delivery.

However, the patients referred to higher centres were excluded from the study.

Study design

Patient satisfaction was conceptualised mainly based on Donabedian’s theory of healthcare quality with patient characteristics, structure, and process as the major determinants.² The questionnaire comprised of two parts. The first part related to the patient’s socio-demographic background and the second part to patient satisfaction. At the time of discharge patients were given a set of questionnaires. If the patient was illiterate, face to face interview was carried out. Questionnaire consisted of specific questions evaluating main aspects of patient care, regarding behaviour of doctors, nursing staff and others, patient’s involvement in their management plan, their satisfaction with treatment was assessed. The socio-demographic information like age, education, occupation was collected. Further the patient satisfaction parameters like satisfaction with communication, birthing satisfaction, staff professionalism, hospital facilities, and overall satisfaction were ascertained through questionnaire and interview. For illiterate patients, trained staff conducted interviews. The approval of ethical committee was obtained.

RESULTS

Age

Majority of patients (56%) were of 20-25 years age group. 34% of patients were in 25 to 30 years age group and 10% of them were in 30-35 years age group. The age distribution represented typical age profile of patient at the time of delivery in the hospital.

Education

Only 15% of patients were illiterate which required personal interview for data collection. Out of 85% of literate patients 17% had below 10th class education, 45% had completed their high school, and 23% had a degree level education. The educational background of patient matched with typical patient profile of patient at delivery.

Occupation

Majority (56%) of the patients were housewife. However, 44% of patients were having some form of occupation. The occupation profile also matches with typical profile of the patient in our hospital.

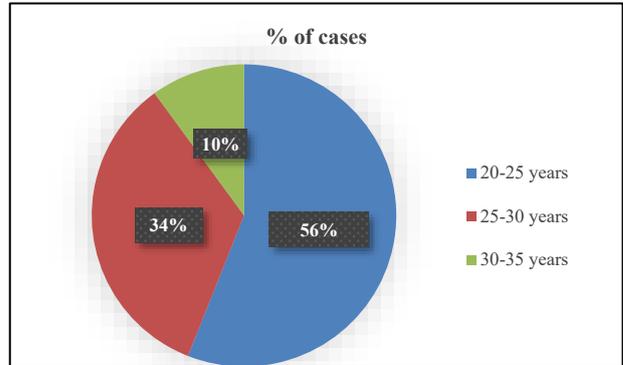


Figure 1: Age distribution.

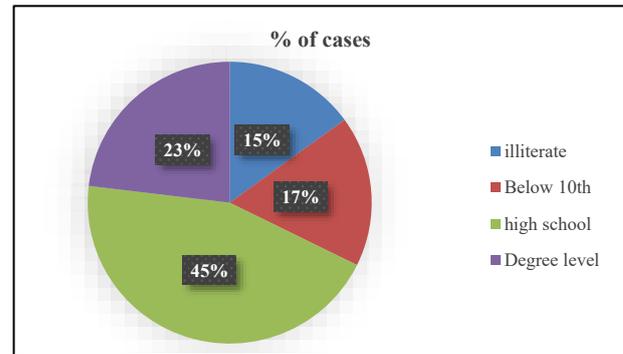


Figure 2: Education of participants.

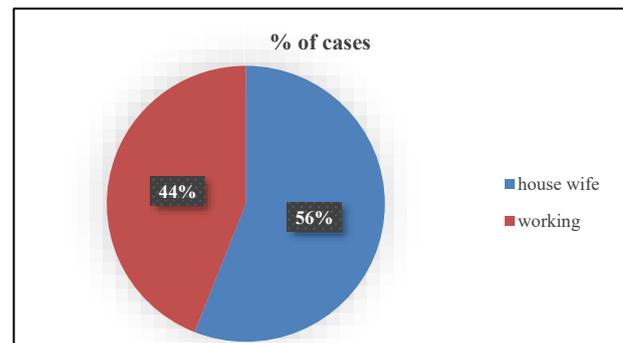


Figure 3: Occupation.

Communication

Out of all the patients 92% of the patients felt that the treatment plan was explained to them well and 90% of the patients felt that they were allowed to choose the treatment options. The treatment options mostly pertained to elective caesarean, contraceptive choice, birth companion etc. When it came to treatment satisfaction, 86% of the patients were satisfied with the treatment given.

Table 1: Communication.

| Questionnaire | Satisfied | | Unsatisfied | |
|--------------------------------------------------------------------|-----------|---------|-------------|---------|
| | Frequency | Percent | Frequency | Percent |
| 1. Whether you have explained about treatment plan? | 920 | 92 | 80 | 8 |
| 2. Whether you have been allowed to choose your treatment options? | 900 | 90 | 100 | 10 |
| 3. Have you been satisfied with treatment given? | 860 | 86 | 140 | 14 |

Table 2: Birthing satisfaction.

| Questionnaire | Satisfied | | Unsatisfied | |
|---------------------------------------------------------------------------------------------------------------|-----------|---------|-------------|---------|
| | Frequency | Percent | Frequency | Percent |
| 1. Whether there is privacy during intrapartum period? | 1000 | 100 | 0 | 0 |
| 2. Whether birth companion was allowed to accompany you during labour? | 1000 | 100 | 0 | 0 |
| 3. Whether you had been given freedom to choose a comfortable position during birthing (squatting, standing)? | 893 | 89 | 107 | 11 |
| 4. Whether breast feeding initiated within one hour of birth? | 907 | 91 | 93 | 9 |
| 5. Will you come to hospital for next delivery? | 933 | 93 | 67 | 7 |
| 6. Will you refer other pregnant women to this hospital? | 920 | 92 | 80 | 8 |

Table 3: Staff's professionalism.

| Questionnaire | Satisfied | | Unsatisfied | |
|------------------------------------------------------|-----------|---------|-------------|---------|
| | Frequency | Percent | Frequency | Percent |
| 1. How was the hospital staffs behavior towards you? | 927 | 93 | 73 | 7 |
| 2. How was the staffs care during delivery? | 933 | 93 | 67 | 7 |
| 3. Did you face any verbal abuse? | 947 | 95 | 53 (yes) | 5 |
| 4. Did you face any physical abuse? | 1000 | 100 | 0 (yes) | 0 |

Table 4: Hospital facility.

| Questionnaire | Satisfied | | Unsatisfied | |
|---------------------------------------------------------------------------------|-----------|---------|-------------|---------|
| | Frequency | Percent | Frequency | Percent |
| 1. Have you been satisfied with hospital infrastructure? | 813 | 81 | 187 | 19 |
| 2. Whether hospital was clean or not? | 853 | 85 | 147 | 15 |
| 3. Whether bed was provided? | 927 | 93 | 73 | 7 |
| 4. Whether food was provided in hospital or not? | 1000 | 100 | 0 | 0 |
| 5. Whether vehicle was provided by hospital staff to reach home after delivery? | 1000 | 100 | 0 | 0 |

Birthing satisfaction

The results show a high level of maternal satisfaction with intrapartum and postnatal care services. All women (100%) reported satisfaction regarding privacy during labour and permission for a birth companion, indicating excellent respectful maternity care. A large majority were satisfied with being given freedom to choose a comfortable birthing position (89%) and with initiation of breastfeeding within one hour of birth (91%). Overall satisfaction with services was reflected by 93% willingness to return to the hospital for future deliveries and 92% willingness to recommend the hospital to other pregnant women. These findings demonstrate generally

positive perceptions of care, with only small proportions of dissatisfaction across most parameters.

Staff's professionalism

Most women were satisfied with the behavior of hospital staff (93%) and the care provided during delivery (93%). A large majority did not experience verbal abuse (95%), while none of the women reported any physical abuse (100%).

Hospital facility

Most women were satisfied with the availability of beds (93%) and reported adequate cleanliness of the hospital

(85%). Satisfaction with overall hospital infrastructure was comparatively lower (81%), indicating scope for infrastructural enhancement. All respondents (100%) were satisfied with the provision of food and transport facilities for returning home after delivery, reflecting strong support services provided by the hospital.

Overall satisfaction

The overall satisfaction was as follows: good: 83%, excellent: 17%. None reported poor services.

The average satisfaction level was 92.5%. This compares well with the results obtained in similar studies.³

DISCUSSION

The demographics of the patient under the study was very similar to the overall patient profile of the similar group in the hospital. There was very high level of satisfaction among the patients (90%) on the communication front. This has contributed to patient's overall satisfaction rating which is 92%. Shamoradifar et al have shown in their study that effective communication as per WHO care model improves overall satisfaction level in patients.³ Our findings also align with earlier studies showing that provider behaviour, communication, and facility environment strongly correlate with patient satisfaction.^{4,6}

During birthing, privacy, and choice of companion has been received 100% endorsement. The choice of birthing position, breast feeding response, willingness to come for next delivery and referring others to come to the hospital has received 89-93% endorsement. Although these figures are better than other reported data of 55.4% by Alemu et al, there is further scope of improvement.⁷

The satisfaction with behaviour of hospital staff varied between 93-95%. In one of the studies by Suthar et al it was indicated that satisfaction with nursing staff was about 66%.⁸ The high level of satisfaction perhaps is the result of well-trained all female paramedic staff in the hospital.

On cleanliness and infrastructure front the satisfaction score 81 and 85% which is low compared to scores obtained for other parameters. However, in similar study by Kaya et al in Turkey has indicated 78% satisfaction with clinical facilities, 76% satisfaction with staff professionalism and 65% with communication.⁵ Indicating similar result on infrastructure front but much better result in our study on staff professionalism and communication front.

The study demonstrated high satisfaction levels across multiple domains of obstetric care, reflecting positive outcomes from LaQshya program implementation. Nearly all patients experienced respectful maternity care, including privacy, companion support, and timely breastfeeding initiation.

However, areas such as hospital infrastructure (81%) and cleanliness (85%) require further strengthening.

The absence of physical abuse and minimal reports of verbal abuse demonstrate progress in promoting respectful maternity care- a key LaQshya objective. Overall, the findings reflect respectful, supportive, and abuse-free maternity care, with only a small proportion of women reporting dissatisfaction or verbal abuse. The findings show overall good satisfaction with hospital infrastructure and facilities, though some areas need improvement.

The study window period was only three months and to that extent data doesn't represent satisfaction throughout the year and over a long period. This is the limitation of the study and in future longer duration study need to be done.

CONCLUSION

Overall, patients were highly satisfied with the obstetric services provided by the hospital, with an average satisfaction level of 92.5%. Most of the patients expressed satisfaction with the birthing experience, healthcare providers' attitude, quality of medical care, and hospital facilities. The implementation of the LaQshya program has played a significant role in improving hospital infrastructure, enhancing the quality of obstetric care, and increasing overall patient satisfaction. Furthermore, the assessment of patient satisfaction helped identify specific areas that require focused efforts to further improve patient well-being and the quality of healthcare services.

More such studies are needed to evaluate the effectiveness of the program, and it need to be carried out across the hospitals so that necessary improvement in scheme can be made and delivery of such scheme can be more effective. This will result in optimal utilization of resources and improved healthcare delivery with feedback mechanism in place.

Lessons learnt- To further improve the quality of obstetric care, strengthening hospital infrastructure and sanitation facilities should be prioritized. Enhancing patient-provider communication through regular training programs is essential to improve patient experience and trust. Periodic patient satisfaction audits should be conducted under the LaQshya program to monitor service quality and identify gaps. Isolated instances of verbal abuse need to be addressed through staff sensitization and respectful maternity care training. Additionally, maintaining privacy during labour and allowing birth companions should continue as standard practices to sustain high levels of patient satisfaction.

Funding: No funding sources

Conflict of interest: None declared

Ethical approval: The study was approved by the Institutional Ethics Committee

REFERENCES

1. Kalaja R. Determinants of patient satisfaction with health care: a literature review. *Eur J Med Nat Sci.* 2023;6(2):45-52.
2. Bergh K, Bishu S, Taddese HB. Identifying determinants of patient satisfaction in antenatal care in Kenya, Tanzania, and Malawi. *BMC Health Serv Res.* 2022;22:746.
3. Shamoradifar Z, Asghari-Jafarabadi M, Nourizadeh R, Mehrabi E, Areshtanab HN, Shaigan H. The impact of effective communication-based care on the childbirth experience and satisfaction among primiparous women. *J Egypt Public Health Assoc.* 2022;97:12.
4. Zweig S, Kruse J, Lefevre M. Patient satisfaction with obstetric care. *J Fam Pract.* 1986;23(2):1.
5. Kaya SD, Maimaiti N, Gorkemil H. Assessing patient satisfaction in obstetrics and gynecology. *Int J Res Med Sci.* 2017; 5(9).
6. Mahfouz ME, Abed AM, Alqahtani MS, Albaqami AM, Alsubaie MM. Patient satisfaction toward health care performance in the obstetrics and gynecology departments among hospitals in Saudi Arabia. *Int J Med Develop Countries.* 2020;4(2):338.
7. Alemu EM, Kaso AW, Obsie GW, Fessaha HZ, Agero G. Maternal satisfaction with delivery service and associated factors among women who gave birth at public hospitals in Guji Zone, Southern Ethiopia. *BMC Women's Health.* 2024;24(1):227.
8. Parihar RR, Suthar A. Patient satisfaction towards the quality of nursing care among patients of private hospitals of Jodhpur, India. *Int J Res Med Sci.* 2023;11(7):2599-604
9. Widjaja HP. Assessment of patient satisfaction among pregnant patients in the out-patient department of obstetrics and gynecology section at Metropolitan Medical Center Manila. *J Manaj Kesehat Indones.* 2020;8(3):148-52.
10. Chalhoub HA. Patient satisfaction with primary health care services in Qatar: a quality improvement study in a government staff clinic. *Saudi J Health Syst Res.* 2025;5(1):3-15.
11. Jameel A, Sahito N, Guo W, Khan S. Assessing patient satisfaction with practitioner communication: patient-centered care, hospital environment and patient trust in public hospitals. *Front Med.* 2025;12:1544498.
12. Imam SZ, Syed KS, Ali SA, Ali SU, Fatima K, Gill M, et al. Patients' satisfaction and opinions of their experiences during admission in a tertiary care hospital in Pakistan- a cross sectional study. *BMC Health Serv Res.* 2007;7(1):161.
13. Sinyiza FW, Kaseka PU, Chisale MR, Chimbatata CS, Mbakaya BC, Kamudumuli PS, et al. Patient satisfaction with health care at a tertiary hospital in Northern Malawi: results from a triangulated cross-sectional study. *BMC Health Serv Res.* 2022;22(1):695.
14. Vyas H, Ojha J, Bhardwaj P. Maternal satisfaction among mothers delivering at public health facilities in India: a narrative review. *Int J Community Med Public Health.* 2022;9(5):2103-9.
15. Marama T, Bayu H, Merga M, Binu W. Patient satisfaction and associated factors among clients admitted to obstetrics and gynecology wards of public hospitals in Mekelle, Ethiopia. *Obstet Gynecol Int.* 2018;2018:2475059.

Cite this article as: Singh A, Suganya K, Mounika P. Assessment of patient satisfaction in obstetric care under the LaQshya program. *Int J Reprod Contracept Obstet Gynecol* 2026;15:946-50.