ROLE OF PARAMEDICAL STAFF AND ITS IMPACT ON PATIENT SATISFACTION AND EXPECTATIONS IN HEALTHCARE SECTOR – A REVIEW

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ABSTRACT: Healthcare sector is a peculiar sector wherein it deals with the human beings. Before the entry of private players it is under the control of state and central governments and the one culture is entirely different. Globalization at the entry of private players in healthcare sectors by starting superspeciality / Multi Speciality Hospitals with the latest technology and expertise the healthcare sector scenario entirely change, due to the advancement in healthcare in line with advanced countries, international patients are also opting for healthcare procedures in developing nations. This see saw are change brought a peculiar situation wherein paramedical staffs are playing important role. They became the backbone of the healthcare sector because these are the people who are directly in contact every time with the patients and their family members and with the healthcare professionals under whose guidance they are working. Patient satisfaction mainly depends on these paramedical staff and their service rendered to the patients. Hence, a study has been conducted with the available material to examine the role of paramedical staff their services towards patient satisfaction and the implications and complications arising therefrom. In addition the effect of those omissions and commissions that attracts the Indian law and the patients rights are also examined with the help of some decided cases. Finally suggestions are given to improve the services of Paramedical staff and to increase their efficiencies so that more fully satisfied patients will be discharged.

Keywords: Paramedical Staff, Indian Laws, Patient Satisfaction, Case law

HISTORY:
Throughout the evolution of pre-hospitalization care there has been an ongoing association with military conflict. One of the first indications of Paramedics / Paramedical Staff is managing injured persons during conflict / wars dating back to Roman Empire. During those days aging military personal who are no longer able to fight were given the task of organizing and the removal of wounded soldiers from the battle field and providing some form of healthcare. As the days progresses this Paramedical staff has grown to and evolve as a profession with competence knowledge, and certification. In the early days the technicians (paramedics / Paramedical Staff) with limited training performing small and specific procedures and ultimately the profession of Paramedical Staff has come into stay. In some countries these people have become second tier medical professional and are being granted the legal status of health professionals after meeting the said standards of education, proficiency and expertise and registration. Paramedical staff in most jurisdictions administer a variety of the emergency medications. The specific medications they are permitted to administer vary widely based on local standards of care and legal restrictions.
I. INTRODUCTION:

In the words of A. Whittaker, “Opening of the Healthcare sector under the general agreement of trade and series (GATS) and increased corporatization of Healthcare Facilities (Hospitals) in Asian Countries are reasons for the growth of Healthcare or Health Tourism in Asian Countries”.

Globalization of healthcare and advent of corporate culture, the phenomenal raise of global healthcare travelers in recent years as spurred many countries to join the band wagon in particular Asian Countries like India, Thailand, and Singapore. The flow of international patients across the borders has changed the pattern of demand and supply of healthcare services over the recent years this leads to the advent of corporate culture and private players entering into the field has changed the very functioning of healthcare.

It is understandable that healthcare professionals occupy a sacred place where the diagnosis, management and procedure for ailment / better wellness is considered. However, the fact remains that without paramedical staff like nurses, midwives, technicians, ICU Assistants and allied staff etc., an healthcare professional cannot accomplish his/her task and fulfill the expectations of the patients. Hence many countries having visualized the importance of paramedical staff started giving professional training and grooming them to be fit into the required position in healthcare along with healthcare professionals. Of these paramedics usually equated with paramedical staff, though are doing a similar job but their functioning is pre-hospital medical emergency service, including ambulance service.

II. WHO ARE PARAMEDICAL PERSONNEL:

Paramedical Personnel or healthcare workers provide clinical services to patients under the supervision of a physician. The term encompasses nurses, midwives, therapists, technicians and such other ancillary personal involved in medical care but is frequently applied specifically to highly trained persons who share with physicians and other healthcare professionals who are directly responsible for the health of patients. Paramedical Personnel also includes physicians’ assistants, surgeons’ assistants, emergency medical technicians etc., These paramedical personnel perform routine diagnostic procedures such as collecting blood samples and therapeutic procedures such as administering injections or suturing wounds, in addition making routine health assessments and collecting medical histories of the patients and helping and educating the patients in their health requirements.

Hospitals are complex organizations that provides services to the patients seven days a week, 24 Hrs a day and healthcare professionals and paramedical staff are the main human resources that they spend majority of their time in the hospitals. The following personnel who are engaged in the field of sanitation, dental hygiene, pharmacy, physiotherapy, laboratory medicine etc., are also covered by paramedical staff. A Paramedical Person is a well trained healthcare professional who provides emergency treatment including life supporting system to patients during emergency, attending urgent medical needs of patients to stabilize their condition until an healthcare professional can administer more specific and extensive procedure. They are authorized to use life saving medicines and equipments and they will attend the patients in the ambulance before the patient reaches the healthcare facility. The paramedical staff second in the chain of healthcare command and reports directly to a supervising healthcare professional. These people are also responsible for making legal and moral decisions in emergency care. A paramedical professional monitors each patient under his/her control during stay in the healthcare facility and they will in addition to treating transmit the treatment results to other required departments for necessary care. The paramedical service includes fracture management, spinal injury management, obstetrics dealing with burns and assessment; in addition they must have well trained to deal with medical equipment maintenance procedure, radio operating procedures along with emergency vehicle operation. The paramedical staff serve many jobs like medical job maintenance, radiography technicians, radiologists, physiotherapists, speech therapists, audiologists, dialysis, emergency functions perfusion techniques, cardiac techniques, respiratory therapies etc.,

III. ROLE OF PARAMEDICAL STAFF

1. Inpatient care that includes,
   a. Comprehensiveness (hospital care is available to all)
   b. Continuity (Provide a continuous medical care to all patients)
   c. Availability (Proximity and availability to equal to all patients)

2. When the patient rights have been violated
   Healthcare professionals must begin to talk about their mistakes as well as solutions for the prevention of those mistakes

3. Policy and healthcare quality
   Quality assurance includes assessment of the current level of quality and correct to action to rectify the deficiencies.

4. Guidelines in the healthcare system:
   The main function of paramedical staff and healthcare professional is to protect maintain and restore the health of individuals from their present situation. Healthcare professional initiate and takes appropriate methods to promote the health of the patients and paramedical staff have to follow the instructions and putting their service effectively. They should give specific attention to each patient and also protect their personal data, healthcare procedure because it is a confidential matter of each patient. Hence the healthcare professionals who got access to such information should strictly abide by the rule of privacy.
5. **Education of Paramedical staff:**

Health involves human element. Paramedical staff should have a full knowledge of the functioning of the human being and immediate steps required during emergency. For example nursing care must be organized, must have the right to an autonomous professional expertise and professional ethics. The key competence of paramedical staff are, the required ability to protect, maintain and restore the health of individuals as per the guidance and instructions of the healthcare professionals.

6. **Rights of the patients to health in accordance with the principles of medical deontology (Moral Obligation)**

Medical deontology is the science of professional duties, the moral actions of paramedical staff and their morals in professional and medical activities. The duties of paramedical staff, the professionals working in healthcare facilities are required to carry out their professional duties in accordance with the ethical principles and internal regulations, professional duties and obligations. Some of the consequences of poor professional performance are, (i) post operative wound infections, (ii) post operative pulmonary infections, (iii) misapplication of drugs (iv) anesthetic events, (v) occurrence of pressure aulsur. Hence it is the duty of the paramedical staff to avoid such discomforts to the patients by giving them proper care and attention.

7. **Maintenance and Preparation of Patients Records:**

(i) Preparation of daily health chart by concerned nurse  
(ii) Collection of reports from lab technicians of individual patients and reporting and recording the same  
(iii) Transit information of individuals patients between shift in-charges  
(iv) Preparation of total discharge record of individual patient

IV. **PATIENT SATISFACTION:**

Patient satisfaction is a multifaceted concept that reflects the quality and type of the service provided by the healthcare professionals and paramedical staff and healthcare service providers to see that how well it is delivered and the extent to which the needs and expectations of individual patient are provided. Patient satisfaction is an indicator as to the performance of healthcare professionals, paramedical staff and healthcare service providers. Patient satisfaction reflects directly patients perspective and also serve as a connection between the needs and desires of the patient and the service provided. POSCOE (1983) explained patient satisfaction as, “a reflection of the healthcare recipients to the salient features of the process, context and result of the experience to the services provided by the healthcare professionals, paramedical staff and providers.”

Nursing care has always been focused to maintain people healthy, to provide ease, care and assurance to the patients. As nurses are involved in each and every part of the patient care in the healthcare facility, the nursing care is considered to be the key factor on which the satisfaction of the patient and their family members is dependant.

V. **PATIENT SATISFACTION AND EXPERIENCE WITH PARAMEDICAL SERVICES:**

1. The traditional practice of hospital pharmacist from a dispenser has been changed to the bedside patient care and pharmaceutical care planning. Once this is established the pharmaceutical care will be at the bedside of the patient, which minimizes the loss of time unnecessary complications of mismatch of the drugs etc., This procedure give more satisfaction to the patient because the phamotherapy which is at the bedside of the patient will give more satisfaction to the patient.

2. The important section of paramedical staffs are the nursing staff. Nursing care has always been focused to maintain people’s health, to provide, ease, care and assurance and confidence to the patients; because nurses are involved in each and every part of the patient care in the healthcare facility, the nursing care is considered to be a key factor on which the satisfaction of the patient depends. IN many cases the patients are afraid of putting questions to doctors. On the other hand because of the intimacy they have with the nursing staff they used to put questions to get required answers to their satisfaction. Hence nursing staff should be more careful, cordial, conscious of their duty and with pleasant mannerism can give better satisfaction to the patient. On the contrary the nursing staff are duty bound with no human touch and human feeling, the patient will be dissatisfied.

VI. **COMMUNICATION:**

Nurse patient communication and patient satisfaction are interrelated. If the communication between the patient and the nursing staff are not cordial the patient will be dissatisfied the importance of the communication of hospital staff especially paramedical staff with the patients and their families is very much important in calculating the expectations and satisfaction of the patient and their families. Communication place an important role between the nurses and other staff and the patient and patient’s requirements doubts and anxieties. If the nurses and the other staff can improve their skills of communication the patient will be more satisfied because he / she feels that the nursing staff are more conscious of his / her improvement. Better and appropriate communication guarantees better psychological position of the patient by treating the ailments, controlling the pain and enhancing satisfaction of the patients.

(i) Communication between patients and nurse:  
(ii) Communication between patients and hygienic staff  
(iii) Communication between nurses  
(iv) Communication among paramedical staff  
(v) Communication between nurses and Physicians and Surgeons
VII. BEHAVIOUR OF PARAMEDICAL STAFF:

Another important aspect of patient satisfaction and expectations are related to behaviour of paramedical staff. Healthcare professionals (Physicians, Doctors, Surgeons) are occasional visitors to the patients when required and for routine rounds. On the other hand paramedical staff that includes nursing staff, lab technician, midwives, sanitation workers, pharmacists etc., are the constant and regular visitors to the patient in getting them tested in labs (X - Rays, MRI, Scanning Etc.), collection of blood, urine and stools etc., providing injections, medicines at regular intervals as directed by the healthcare professionals, timely food by the nutritionists and Class - IV employees looking after the amenities in the healthcare facility. If these people who are called the paramedical staff are not courteous towards the patients, the outcome is very different. Since the patient and their families are in a state of disturbed mind and anxiety regarding the patient’s progress any lapse in the behaviour of the above people will antagonise them. If a friction arises between the paramedical staff and the patient and their families it is very difficult to normalize the situation. As an example, if the patient want bedsheet to be changed / a dim light is to be provided / more AIR condition is required / getting disturbances from other patients while sleeping etc., are not attended in a cordial atmosphere the patient get annoyed. Hence it is the duty of the paramedical staff who are attending to cultivate a culture of patience and attending the patient with a good gesture and smile. Sometimes the patient or the family members may ask irrelevant questions with the staff; even them the staff should not loose their temper and behaviour in a manner that gives the patient dissatisfaction. Hence a proper training should be given periodically to the paramedical staff on how to behave with the patients and their family members because no two patients are alike. If this kind of harmonized behaviour is adopted the patient feel more satisfied and the progress will be more satisfactory.

VIII. PARAMEDICAL STAFF NEGLIGENCE IN THEIR RESPECTIVE DUTIES:

In all probability certain flaws will occur while the paramedical staff viz., nurses, midwives, lab technicians, nutritionists etc., in their act of omissions and commissions. While a technician when he takes blood samples from the patients, since he is collecting number of samples from different patients if the labeling is not proper in accordance with the patient and the sample, the results will be unimaginable because based on the report the healthcare professionals will take a decision of procedure according to the results. Likewise, if the nurses and midwives do not follow the instructions given by the doctors and miswrite or misinform the patients the results will be disasters; and also when they administer the medicines and injections to any patients not in accordance with the case sheet as advised by the doctors it is clear case of negligence on the part of the medical staff.

At times it so happen, especially in emergency care (ICU) where each patient is in a critical condition and unless or otherwise the attending staff (paramedical staff) are not cautious and vigilant, the results will be disasters. In ICU every minute is precious and every minute, every stage and every change of each and every patient is valuable and precious to take a decision for further course of action and it is the duty of the paramedical staff who are attending, inform the same to the concerned doctors immediately. Any laxity on their part the results will be unimaginable at times.

In all these cases the paramedical staff are liable for prosecution for their acts of omissions and commissions in civil and criminal.

All healthcare professionals such as physicians, surgeons, nurses and other paramedical staff are responsible for health safety of their patients who are under their observation and treatment. These people supposed to give quality care of health and other provisions that a patient needs with due diligence. However at times it so happen due to one reason or other the healthcare professionals and paramedical staff in general failing the responsibility in attending the patients either acting maliciously or by providing sub standard care and attention, thus causing far-reaching complications and even at times loss of life, in such circumstances paramedical staff who are responsible will attract punishment.

IX. INDIAN LAWS THAT ATTRACTS PARAMEDICAL STAFF OF THEIR NEGLIGENCE:

a) According to Salmond Law of torts, negligence is an omission to do something which a reasonable man, guided upon those considerations which ordinarily regulate the conduct of human affairs, would do, or doing something which a prudent and reasonable man could not do. That means negligence is the breach of legal duty of care and that breach of legal duty gives the patient a right to initiate action against the erring personnel.

b) Due to globalization and entry of private players in the field of healthcare lot of changes have come. Healthcare providers who offer medical advice and procedure implicitly state that they have the skill and knowledge to do so, and also they have that kind of knowledge and skill to decide what type of procedure the patient needs and how to administer the same. This is known as implied undertaking or implied contract on the part of the healthcare providers.

c) Civil, Criminal Negligence and Consumer Protection Act: The healthcare providers are liable for the services individually and vicariously can be charged with negligence and sued either in Criminal / Civil Courts or Consumer Forum. Since Civil and Criminal courts will take much longer time due to procedural lacunas the patients are brought under the purview of Consumer Protection Act, 1986 by the Supreme Court of India in their landmark Judgments, to give early compensation. Only those cases where treatment is routinely provided free of cost at nongovernment or government hospitals, health centers dispensaries or nursing homes consumer protection act, does not attract. Negligence on the part of the healthcare providers (hospitals) can be brought under criminal courts and charged under Sec. 304-A IPC for causing damages amounting to rash and negligent act or in civil courts where compensation is sought in lieu of the damages suffered by the patient, as the case may be.

d) Indian Penal Code is the basic Criminal Law it contemplates various provisions for punishment under various offences committed. Some Sections related to the medical negligence laws in India are Sec. 52, 80, 81, 83, 90, 91, 92 and 304-A, 337, 338 IPC. A bare reading of the mentioned sections would clearly show that there is no difference between an ordinary crime committed by a criminal...
and the act of negligence done by healthcare professional / paramedical staff. In both these things the rash and negligent act done by the healthcare professional while treating his / her patient. The negligence is caused damage to the body of a patient a temporary or permanent. In the case of the medical negligence by the healthcare professional or paramedical staff the courts held “gross lack of competency or gross inattention, or wanton indifference to the patient safety, which may arise from gross ignorance of the science of medicine and surgery or through gross negligence, either in the application and selection of remedies, lack of proper skill in the use of instruments and failure to give proper attention to the patient.”

e) Medical Negligence Laws in India under the civil laws are mainly covered under, The Consumer Protection Act, 1986 which holds medical professionals responsible for deficiency of service based upon facts of each case. In case the healthcare professional guilty under the civil law, the patient is awarded damages or compensation by the courts, and the quantum and mode of damages is calculated by the courts based on the facts, the circumstances and the gravity of injury.

f) Damages are the monetary compensation given by the courts for the loss / damages caused to the patient and is of two kinds:

(i) Pecuniary Damages: means damages awarded (amounts) for financial loss past or future whether precisely calculated or not. All medical expenses, costs of nursing loss of earning capacity, cost of services attendants are also included in pecuniary damages.

(ii) Non Pecuniary Damages: For pain and suffering, past or future loss of enjoyment of life in respect of sports, married life etc.,

g) Liability of Hospitals in case of Negligence: Healthcare providers liability with respect to healthcare negligence can be direct liability or vicarious liability. Direct Liability refers to the deficiency of the healthcare provider itself in providing safe and suitable environment for procedures as promised. Vicarious Liability means the liability of an employer for negligent act of its employees. An employer is responsible not only for its own acts of omissions and commissions but also for the negligent act of their employees, as long as the act occurs within the scope and course of employment, under the “Principle of Respondent Superior”. Healthcare providers are also liable under the common law principles represented in the phrase “qui facit per alium facit per se” means one who acts through another, acts in his / her own interest. The center for disease control (CDS) had issued guidelines that recognize that, with the exception of healthcare workers and personal service workers who use instruments that pierce the skin, no testing or restriction is indicated for workers known to be infected with HIV but otherwise perform their duties. If any healthcare provider does not follow the guidelines and there occurs infection to the patients it can be held directly responsible for negligence.
X. LIABILITY OF PARAMEDICAL STAFF – PATIENTS RIGHTS:

1. When a medical professional or a paramedical staff does any inhuman behaviour, creating an environment of terror using medical knowledge or license, then it is not only negligence it is medical terrorism.

2. At times the helpless patients who are in need of care (health) are subjected to further trouble by paramedical staff who should be taking care of them. The pain, the anguish and the condemnation, the distress and humiliation that the patients are going through is comprehensible. Instead of embracing and identifying themselves to the patient, the anguish is aggravated through neglect, lack of concern and sheer abandoned until the money is deposited as required.

3. Transportation of the patient: Anesthologist are confronted with shifting the patient to a higher center due to intra – or – post – operative complications, either expected or unexpected. In this juncture it is important to see whether the patient is fit to be shifted or not. A stable patient during the course of anesthesia can suddenly deteriorate. According to Sri Dhawan, the standard of care in emergency cases implies three obligations, screening the patient – stabilizing the patient condition – transfer of the patient for better treatment.

4. Most common EMT (Emergency Medical Technicians) and Paramedics Malpractice: Some of the most crucial medical diagnosis and treatments happen at the ambulatory stage, even before the patient gets to the hospital. When a paramedic and EMT failed to provide reasonable care that patient needs at that time, it can lead to severe sometimes life threatening consequences. These people are the first responders in medical emergencies. They are trained to assess life threatening conditions, provide crucial medical emergency treatments and life support services at the scene of accidents, prepare patients for transportation to hospital. Some of the causes of negligence by paramedics / EMT are

(a) Delayed responses
(b) Failure to bring adequate medical equipment or functional life saving medical devices
(c) Improper use of ambulance equipment
(d) Failure to follow standard EMT evaluation protocols such as checking patient’s breathing and heart beat or ensuring patients have adequate airway.
(e) Misdiagnosis: failure to administer proper medication or administering wrong dosages / over medication
(f) Failure of ambulatory equipment
(g) Negligence or Reckless ambulance driving leading to further injury,
(h) Willful failure to attend the patient at the accident scene or leaving a patient at the accident scene.

5. Negligence: Acts Of Omissions And Commissions

(a) Acts of omission:
   (i) Failure to use acceptable scientific techniques for diagnostic tests
   (ii) Failure to monitor quality control of tests
   (iii) Failure to provide prenatal care
   (iv) Failure to attend a time of delivery
   (v) Failure to use optimum techniques leading to misdiagnosis
   (vi) Failure to attend during emergency and called for medication
   (vii) Failure to inform the confirmed healthcare professional during emergency
   (viii) Failure to transfer the information during shift change
   (ix) Failure to prepare the patient chart with all details

(b) Acts of Commissions:
   (i) Superficial examination during emergency
   (ii) Inform the physicians and surgeons without taking the proper information from the patient
   (iii) Mishandling / Manhandling the patients
   (iv) Preparing the case sheets with wrong information or interchange of patients information
   (v) Administering the medicines and injections without following the instructions of the physicians and surgeons
   (vi) Use of unsterilized instruments
   (vii) Improper / negligent way of dressing the patients’ wounds
   (viii) Erroneous results of laboratory tests especially venereal diseases and HIV infections.
   (ix) Contamination of Materials in the laboratory leading to erroneous results
   (x) Inadequate pretest requisites
   (xi) Wrong reporting of the sex of the new born baby
   (xii) Wrong Diagnosis false positive and False negative
   (xiii) Failure to record readings which are required at regular intervals
   (xiv) Unable to insist the physician surgeons during emergency causing delay and anxiety to the doctors

XI. PATIENTS RIGHTS:

1. Everyone has a right to live to his/her life, liberty and safety and right to the highest standard of health.

2. Accredited standards for the health professionals. Health professionals in the hospitals of general type too must undergo systematic training procedure in their profession in order to reduce errors and improve access to satisfied patients.
3. When patients rights have been violated
4. Policy and healthcare quality
5. Guidelines in healthcare system
6. Rights of the patients to help in accordance with the principles of medical deontology.
7. The duties of healthcare professionals, if they failed to observe the duties the results will be
   a. Post operative wound infections
   b. Post operative pulmonary infections
   c. Misapplication of drugs
   d. Anesthetic events
   e. Occurrence of pressure aulsur
8. Patient consent form: while signing the consent form the patient is having every right to know and understand the contents before signing it, any statements that are derogative to his/her personal can be questioned before signing.
9. If a paramedic or EMT has acted negligently occasioning more harm to the patient, the patient can file case against them for personal injury. To prove the case the patient should provide (i) Duty of Care means, paramedic or EMT owes a duty of care to the patient to act prudently as a reasonable provider in a similar situation would; (ii) breach of duty of care: - the paramedic or EMT breached that duty of care by failing to act as a reasonable professional would; (iii) the patient suffered injury because of the breach of duty of care, and this breach was cause of injury.
10. Medical Confidentiality: All healthcare professionals, Medical Instructors Paramedical Staff Workers, Employers, Recruitment Agencies, Insurance Companies, Data Encoders and other custodians of any medical report, file, data or test results are directed to strictly observe confidentiality in the handling of medical information of every patient. Any breach of confidentiality will attract legal proceedings. Any violation of confidentiality will attract penalty and imprisonment for a period of six months to four years.

XII. DECIDED CASES AGAINST PARAMEDICAL STAFF ACCORDING TO INDIAN LAWS:
1. The Hon’ble Supreme Court Judgment in Jacob Mathews Vs. State of Punjab and another, 2005 (3) CPR 70 (SC) 6 SCC. it was categorically observed what is negligence and what is gross negligence and how to decide the negligence of an healthcare professional. This Judgment is a parameter for all healthcare professionals including paramedical staff to decide whether they are negligent of their duties and hence attract punishment.
2. In Malaykumar Ganguly vs. Sukumar Mukharjee and others (7th Aug, 2009), Criminal Appeal Nos. 1191 to 1194 of 2005, Civil Appeal No. 1727 of 2007, where the Apex Court observed “the so-called humanitarian approach of the hospital authorities waiving of the fee in no way can be considered to be a factor in denying the compensation for mental agony suffered by the parents of the patient.”
3. Monohar Choudary Vs. State of Karnataka, (Karnataka High Court 13th December, 2016); where the complainant Doctor on duty at the relevant point and other paramedical staff were attending to the victim. The records would … stated that petitioner herein accused in Crime No. 216/2015 barged into the hospital, kicked the door and abused the paramedical staff as well as the Doctor on duty of dereliction of duty is not taking … and uses abused and filthy language which is said to have recorded by other paramedical staff in their mobile telephone thereafter the complaint is lodged by respondent No. 2: Complainant ……..
4. Punjab Health System Corporation and another Vs. Ratanlal and 2 others (National Consumer Disputes Redressal Commission, 3rd Nov. 2015); once blood sample of the patient had been taken, it was a duty of the paramedical staff of the hospital to take the said samples to …… the laboratory where this test was to be performed. That, having not been done, the hospital is vicariously liable for the negligence on the part of its paramedical staff

XIII. EFFECT OF PATIENT SATISFACTION OF THE ABOVE:

In healthcare organizations since they are dealing with the human beings utmost care has to be taken when providing healthcare service. In healthcare it is not an individual service but a combined service of physicians, surgeons, aestheistics and paramedical staff and other related services that gives a satisfying service to the patient any lapses on the part of any of these above will affect the healthcare of the patient and thus he / she will be dissatisfied. Out of all these people paramedical staff who are directly connected with the patients and their accomplice day in and day out should be very cautious in putting the patient in good humor and listening to them of their pains and sufferings, help them not only with medication but also with consoling words. These paramedical staff are bridge between the doctors (physicians and surgeons and patients) their task is more difficult and they have to receive instructions from their bosses and implement them in the same way as directed. Especially nursing who have to attend number of patients of different ailments, attitudes, behaviours their job is very difficult unless or otherwise they are cautious, show patients and put in their all resources for the comfort of the patients. As somebody said it is very easy to bring 100 patients to an hospital where as it is very difficult to see a fully satisfied patient.
In addition the lab technicians, anesthetistic assistants, other paramedical staff than the nurses and midwives should be cautious in dealing with the patients while taking blood samples, giving injections, taking NRI and X – Rays photos to see that there should be minimum discomfort to the patients; else the patient gets annoyed because the discomfort is more. Added to the during shift change the staff should be doubly cautious and transferring the instructions to the incoming staff, else the results will be disastrous.

In case of emergency the patient gets abnormal changes in his/her health condition the duty staff should give immediate attention to the patient inform the higher ups get instructions follow them in toto to relieve the suffering. In all the paramedical staff plays an important role in an healthcare organization and their services are the parameter for patients healthcare satisfaction.

Also, the paramedical staff should prepare the health records and other information relating to the patients in a proper manner and should be given along with the discharge report with instructions that are to be followed after discharge till the patient, comes to normalized.

XIV. SUGGESTIONS TO IMPROVE SATISFACTION LEVELS WITH THE RESPECT TO ROLE OF PARAMEDICAL STAFF:

Following are the suggestions by the author for the improvement of patient satisfaction:

1. All the paramedical staff are properly educated according to their working conditions.
2. They should have sufficient experience in dealing with the patients.
3. As per the requirement of medical council they should get register themselves in accordance with their professional formalities.
4. Periodical advanced training in their respective fields should be provided.
5. They should be provided with the information of latest developments in healthcare and also special training if any new equipment comes under strict supervision.
6. These paramedical staff are given lectures on behaviour analysis and patient oriented courses.
7. Incentives and promotions should be introduced to enhance the efficiency of paramedical staff.

XV. CONCLUSION:

This article is a review article based on the available material on the subject and a study is undertaken to find out the areas where the patients are not satisfied, how to improve them in addition to the rights of the patients, the legal obligations of the healthcare providers and paramedical staff against any injury or damage caused to the health of the patients. Some decided cases are also mentioned to give an analysis of courts in dealing with such cases where the negligence of the paramedical staff, healthcare professionals, healthcare facilitators and the complications arising therefrom. As the patient is having every right to claim for the damages, loss of life, loss of permanent disablement, equally the healthcare facilities and healthcare professionals and paramedical staff are having immunity if the things are unavoidable and partly the patients and their family members are accountable.

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