

# A Study of Service Quality on Patient Satisfaction Between Public Hospital

Dr. Kapil V. Dongargaonkar<sup>1</sup>, Navale Amit Sahebrao<sup>2</sup>

<sup>1</sup>Head of Department, Swami Ramanand Teerth College (Art & Commerce), Parli Road, Ambejogai, Beed.

<sup>2</sup>Dr. Babasaheb Ambedkar Marathwada University, Department of Management, Aurangabad.

<sup>1</sup>kapildongargaonkar@gmail.com

<sup>2</sup>Amit.navalepatil@gmail.com

*Abstract —One of the important concepts in management and business is service quality. Service quality in hospitals should be directed towards the satisfaction of patients. By using two public hospitals in Johor Bahru as case studies, this paper want to compare the quality of services provided by two public hospitals in Ahmednagar. This paper also wants to identify the service quality dimensions which play important role on customer satisfaction. In order to measure service quality on patient satisfaction, 100 questionnaires were distributed. The data were collected from public that had experience got medical service from both public hospital in Johor Bahru. It comprised question about demographic factors and perception of service quality dimensions (process of clinics care, trustworthiness of hospital, competence, interaction, courtesy and safety). Randomly selected patients filled up these questionnaires and collected data was analysed by descriptive analysis. Results showed that public Hospital A better quality service to their patients as compared to public Hospital B.*

Keywords —Hospital, Patients, Service Quality

## I. INTRODUCTION

Service quality has been studied by many researchers for over two decades. To be successful in service sector, the firms should pay attention on delivering a high service quality in order to gain customer satisfaction. Healthcare sector of a country needs special attentions from the government as quality of healthcare provides hope and relief to the patients and their dependents. It also helps to maintain a healthy human capital that contributes in the development of the country. Now quality has become an icon for customers while availing any services or buying a product and it is also a strategic advantage for the organizations to gain success and remain competitive in the market by delivering superior quality of services or products based on customer requirements. In healthcare, patient perceptions are considered to be the major indicator

in order to assess the service quality of a healthcare organization. It means that customer satisfaction is the major device for critical decision making in selecting a services and quality of services delivered to the customers should meet their perceptions.

The concept of patient satisfaction is not new. Patients are one of the main stake holders among the ever expansive modern world of medicine. Although the roles of patients and doctors have remained fixed, the contexts and backdrops have undergone tremendous changes overtime. Traditionally, there were no clear boundaries between patient care and patient cure. With changing patterns of disease, newer therapies and patients' perceptions, care and cure are now entirely separate concepts. A patient may never get cured but may feel very well-cared for and vice versa.

## II. LITERATURE REVIEW

### a) Service Quality:

The literature shows the service quality is complex processes and difficult to evaluate. It is because high-involvement relationships and some services are high in credence qualities, making customer evaluations complex and difficult. Since healthcare has unique nature, the researcher decided to apply a conceptual framework of service quality in healthcare by Padma et al. (2009). The researchers developed and tested perceived service quality (SERVPERF) among customer using service at hospitals and healthcare institutions, based on the original service quality literature (SERVQUAL). In this study the researcher divided healthcare service quality into six dimensions: process of clinics care, trustworthiness of hospital, competence, interaction, courtesy and safety of hospital.

### b) Process of Clinical Care:

This dimension deals with the functional quality that how the health care organization provides the core service (the technical). This dimension measures how well activities of the health care are implemented practically (Nasir, 2012). Process of clinical care is a core service or technical

quality of healthcare service that enumerates the detail of a primary service including the width and depth of services (Padma, 2009). It comprises admission process; discharge processes and waiting time carry over by staff. It signifies the work carried over from admission to discharge to avail the core service while the fair time taken into consideration. Dagger (2007) found administrative qualities have the greatest impact on service quality perceptions. The customer will not perceive or pay attention to any other dimensions unless the process of clinical care was satisfactory. Even the hospital staffs are perfectly friendly; the service may not be perceived as high quality if the doctor lacks of the necessary competence and skill. In addition, Baldwin and Sohail (2003) contained safety, reliability, technical ability and skills of dental practitioners as “skill and ability” dimension.

c) Trustworthiness of Hospital:

The trustworthiness of hospital influences the confidence the patient has on the hospital which measured by the sense of customer’s well-being feeling in the overall of service provided. Trust captures the level of trust patient reposes in hospital in the expectation that the firm will act in the customer’s best care. Besides that, trustworthiness of hospital represents that how far the service provider consistent to the patient in delivering service. Ramsaran-Fowder (2008) derived an instrument called “PRIVHEALTHQUAL” and identified a new dimension as “Fair and Equitable Treatment / Reliability” is the most important variable which impact on private health service quality. Furthermore, Morgan and Hunt (1994) defined trust as existing when confidence occurs in a partner’s reliability and integrity.

d) Competence:

The quality of healthcare services mainly depends on practitioners’ knowledge and technical skills: “the most important factors influence the quality of my work are my knowledge, expertise, commitment, and examining the patient properly” (Ali, 2014). Healthcare professionals should improve their competencies (i.e. the attitudes, knowledge, and skills) to deliver high-quality services. Professional quality denotes the service providers’ competence and the treatment consequences. Studies revealed that technical quality was the most important factor in both private and public hospitals found that technical qualities have greatest impact on service quality perception. They suggest that through empowering customers knowledge of treatment process and improving customers’ perceptions of service providers’ expertise technical service quality can be improved.

e) Interaction:

Health care services are intangible and often require patient involvement in the treatment process. Therefore, in health care service the interaction between patients and care providers is

very important (Zineldin, 2006). This dimension of service quality measures the quality of information exchange (e.g., the percentage of patients who are informed when to return for a check-up, amount of time spent by physicians or nurses to understand the patient’s needs, etc.), and social exchange, etc. Perceived quality of interaction and communication reflects a patient’s level of overall satisfaction. In this study, interaction is defined as patients’ dealings with doctors and nurses during their stay in the hospitals. The interaction between patients and care providers have an effect on the patient’s perception of quality of care.

f) Courtesy:

To improve patient’s perceptions of the hospital, friendly and courteous staff viz., doctors, nurses, paramedical and support staff are needed (Padma et.al 2009). Caring and respect are the important elements, which are directly related to perception of motivation. Some medical doctors develop good rapport with their patients using some personality characteristics such as respect, helpfulness, reliability, intelligence, and confidence. In a public hospital that the demand for medical services is very high, physicians are not motivated to improve their communication skills (Ali, 2014). Furthermore, friendly and courteous staffs who are doctors, nurses, paramedical and support staff tend to increase or improve patient’s perception of the hospital. Therefore, Hasin et al. (2001) applied “courtesy” and “respect and caring” to represent personnel quality as quality characteristics in their research on healthcare in India.

### III. METHODOLOGY

In this study we used quantitative survey methods based on literature review. This study is conducted in to evaluate the difference between the service quality level between the two public hospitals in Ahmednagar, MH, India. The patients having experience of both the public hospitals were included in the study in order to make a close comparison between the public hospitals. In this research, the researcher used the survey technique to collect the primary data. A cross-sectional study was conducted between February and March 2012 in Ahmednagar, Maharashtra.

### IV. FINDINGS AND DISCUSSION

To understand the difference between the service quality delivered by two public hospital in Ahmednagar, Maharashtra, descriptive statistics representing the mean for each of dimensions in order to increase the understanding regarding the difference in service quality delivered to patient by both public hospitals in MH, India.

## V. CONCLUSION

From the above results and discussions; the empirical findings are evident that public Hospitals are aimed at providing better healthcare facilities to the patients. The results showed Public Hospitals just meets desired service level since the average for all means. Therefore, Public Hospitals need to improve their service quality dimension in this study. Whereas the moderate quality of healthcare services delivered to patients by public Hospitals are due to the many factors. These factors include: government funding and overburdened public Hospitals due to rapid growth in population and people tend to move from rural areas to major cities. These factors are affecting the service quality of public Hospitals. It requires government attentions to improve the existing quality of the public hospital and develop more hospitals in Maharashtra to maintain the healthcare needs of the people.

## REFERENCES

- [1] Andaleeb, S. S., Service quality perceptions and patient satisfaction: a study of hospitals in a developing country. *Social Science & Medicine*, 52, pp. 1359–1370, 2001.
- [2] Afshan, K., Ismail, A., Awais, Y., Zain-ulAbideen S., Diva, T. and Sohail, A. ,Patient Satisfaction – A Comparison between Public & Private Hospitals of Peshawar. *International Journal of Collaborative Research on Internal Medicine & Public Health* Vol. 4 No. 5.,2012.
- [3] M.Abdul. M. A., Habib, A. and Rafiqul I. C., Factors influencing patient satisfaction in primary healthcare clinics in Kuwait. *International Journal of Health Care Quality Assurance*, Vol. 24 Iss: 3, pp.249 – 262, 2011.
- [4] F.Alkaa'ida, F. ,The Mediating Effect of Patient Satisfaction in the Patients' Perceptions of Healthcare Quality – Patient Trust Relationship. *International Journal of Marketing Studies*, Vol. 3, No. 1,2011.
- [5] MCunningham, T. T., Carpenter, C. C., Charlip, R. B., Goodle, J. L., Griffin, D. L., Macchione, N., Snyder, J. M., Stevenson, M. J., Stier, M. K., West, W. K., Young, F. C. and Zuckerman, A. M., *Patient Satisfaction understanding and Managing the Experience Care*. (2nd Edition). Irwin Press, 2006.
- [6] Dagger, T. S., and Sweeny, J. S., Service quality qtribute weights: How do short-term and long-term customers construct service quality perceptions? *Journal of Service Research*, 10(1), 22-44, 2007.
- [7] Gilbert, F.W., Lumpkin, J.R. and Dant, R.P., Adaptation and Customer Expectations of Health Care Options. *Journal of Health Care Marketing*, Vol. 12, No. 3, pp. 46-55, 1992.
- [8] Hasin, M. A. A. and Seeluangsawat, R., Statistical measures of customer satisfaction for health care quality assurance: a case study. *International Journal of Health Care Quality Assurance*, 14(1), 6-13, 2001.
- [9] Issac, G., Rajendran, C. and Anantharaman, R. N., Determinants of software quality: customer's perspective. *Total Quality Management & Business Excellence*, 14(4), 1053-1070, 2003.
- [10] Khanchitpol, Y. and Johnson, W., Measuring hospital out-patient service quality in Thailand , *Leadership in Health Services*, Vol. 26 Iss: 4, pp.338 – 355, 2013.
- [11] Kamyar, G., Mahmood, Z., Seyed J. H., and Shadi M., The impact of Service Quality on patient Satisfaction in Malaysian Hospitals. *Topclass Journal of Business Management and Innovations*, Vol. 1(2) Pp. 47-51, 2014.