

“A COMPARATIVE STUDY ON FACILITIES FOR CARE OF PATIENTS IN GOVERNMENT AND NON GOVERNMENT HOSPITALS AT TONK DISTRICT RAJASTHAN”

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ABSTRACT

Human in global natural views are dependent on environmental locations, climate and power sources of nature. All lives irrespective of rural and urban areas depend on all facilities of the universe which is available in the form of environmental processing factors, natural sources, and climate factors, location of residential, life status, earning fields and feeding systems.

All available systems, as the nervous system and the organic parts of the body depend on health of the person, and health is dependent on the environmental and global sources and nature.

The deficiency in health functions can be due to lack of duties and responsibility, lack of the disciplinary actions, lack of decision making at all levels and ineffective communications and changes in primitive health systems.

There is poor co-ordination, poor physical situations, inadequate infrastructure and poor maintenance of records. There is inadequacy of high technology equipment, negligence in deterioration in the standards of health care, lack of emphasis on patient centered service, lack of quality and supply of food. Lack of in service education for staff, high cost of technical staff, unavailability of machines in government hospitals and high cost of treatment incorporation hospitals.

In India health Care facilities (HCFs) are provided by both private and public sectors. The nature of services provided by public sector differs significantly from that of private sector.

Besides providing curative service, the public sector also provides a number of preventive services. It also aims to educate the population towards environmental, cleanliness and some preventive measures to combat certain disease are highly subsidized by the public sector.

1. INTRODUCTION

How these can be managed better to improve for better health of the people. Health facility is in general terms are where health care is provided. Health facilities range from small clinics and doctors' offices to urgent centers. The large hospitals mainly elaborate emergency rooms and trauma centers.

The number and quality of health facilities in country or regions is on common measure of that area's prosperity and quality of many countries. The health's facilities are regulated to some extent by law and licensing by regulatory agencies is often required before a facility may open for business. Health facilities are owned and operated for profit business, nonprofit organization, and government and in some cases by individuals with varying proportions in the country. India is second largest populated country, 70% Population is living in semi urban and rural areas. Hospitals and health Care services are vital components and any well-ordered and woman society will indisputably be the recipients of social resources. The hospitals should be places of safety not only for the patient, but also for the staff and for the general public.

India, in the past one decade is fast becoming a global hub of medical tourism with a wide range of health care centers catering to a spectrum of medical fields, namely, Allopathic, Homeopathy, Ayurvedic, Yoga centric and so on for providing medical solutions to physical and mental related problems. The recent boom in the organized sector of medical hospitals, comparison to small, medium, large hospitals and hospital chains, not to be left behind, the

medical transcription fields as well signifies the dawn of a new era of successful phase in Indian health care services sector.

The exceptional growth in fitness centers across the country, coupled with the rush in traditional pharmaceutical industries at global level suggests that India has been viewed as a reliable hub for medical solutions at competitive costs and more excellently with appreciable customer care. Touching upon this critical aspect of 'customer care' this determines the satisfaction level of customers of any service organization, more specifically, the hospital services. The Indian hospital sector has woken up to this reality and working more on service quality aspects viz. reliability and responsiveness which score over everything else in clinching clientele for hospital services. The current buzz word in this industry is 'customer centric' operations.

2. NEED FOR THE STUDY

Rajasthan is an important state in India with reference to area demographic and economic profile of the people here, we will have concerns over the public spending to get better health care facilities. The purpose of the study is to use the result and recommendation to manage it better before this look at changed into commenced, extraordinarily limited research in literature were known concerning fitness care centers for the care of sufferers, hospitals of the tonk region in Rajasthan a few of the Republic of India. As in line with better of my records studies related to hospitals inside the tonk location is likewise or now not however loads of essential

the principle target need to air the reason behind choice of hospitals through buyers alternatively they sought-after to spot the fitness care wishes of the patients.

This take a look at makes use of a as an alternative comfy and dependable pattern determined that fitness care facilities have been the crucial reason patients choose hospitals in the town of tonk Rajasthan. This observe differs with the aid of making use of the queries on over two hundred sufferers and Interviews with employees individuals (paramedical or Non paramedical in the opt for hospitals). It builds and extends the study contributed by way of others via truly questioning patients and health facility people and scrutiny their effects on comparable queries.

Most of the research so far addressed numerous aspects of the hyperlink among sufferer's expectations and perceptions concerning fitness care facilities great however the unit handing over the carrier pleasant is unambiguously neglected. We have a tendency to accept as true with this to be trail blazing evaluation that offers a giant new road for evaluation into one in all of the important regions that of the provider knowledge what the patients ask for and desire. India in the past one decade is converting into brief a international hub of scientific commercial enterprise with a big vary of fitness care facilities commercial enterprise to a spectrum of clinical fields specifically- hospital therapy, homeopathy, Ayurvedic, yoga centrally and then on for presenting scientific solutions to physical and intellectual connected problems.

The outstanding growth in fitness facilities across the country in addition to the surge in ancient firm of industries at world stage indicates that Republic of India has been considered as a reliable hub for scientific solutions at competitive prices and plenty of laudably with enormous patron care. Touching upon this important aspect of client care that determines the satisfaction stage of buyers of any provider organization, a lot of particularly The medical institution services the Indian hospital area has woken up to the prevailing fact and dealing loads of on provider satisfactory aspects viz. irresponsibleness and responsiveness that score over everything else in clinching patronage for clinic offerings. Rajasthan is a very essential kingdom of Republic of India with relevancy space demographic and financial profile of the parents here we've got issues over the general public defrayal to set off higher health care facilities.

The aim of the have a look at is to use the result and recommendation to manipulate it better. Via this have a look at we have a propensity to will note out the sufferers incoming to health center whether or not they are satisfied with the reachable offerings or no longer. We are going to get to grasp regarding the centers on hand with relevancy clinical technological and important services in government and agency hospitals. However will those be managed higher to enhance for higher health of the oldsters.

3.OBJECTIVE

[1] To understand regarding the facilities supplied in government and organization hospitals for patients in tonk Rajasthan.

[2] To understand regarding the accessibility first-class of health care offerings for sufferers.

[3] To grasp concerning the affected person delight from the supplied services.

[4] To comprehend the difference of offerings and affected person pride in government and organization hospitals.

4. HYPOTHESIS

H0: there is no association among the delight stage of facilities available in government and employer hospitals.

Ha: there may be associate in nursing affiliation between the delight level of facilities available in government and organization hospitals.

H0: typical facilities do no longer have a vital difference among authorities and corporation hospitals.

Ha: ordinary centers are crucial distinction among government and corporate hospitals.

5. ASSUMPTION

Man and women may have many assumption regarding medical facilities.

6. REVIEW OF LITERETURE

Literature connected with clinic management and control in government and corporation hospitals: T Sreenivas1 et.al (2012) studied regarding the targets:

To studies the pride degrees of the affected person in sample hospitals. To endorse measures to reinforce the government practices that improves affected person delight in hospitals in Republic of India.

Settings: Authority's well-known health center St. Joseph standard sanatorium (SJGH) and NRI medical institution in the state of Andhra Pradesh in South Republic of India. Consequences: 37 matters scales having realistic obligation and validity changed into developed. Seven dimensions of perceived pleasant were identified Admission procedure, physical centers, Diagnostic offerings, behavior of the personnel, Cleanliness, dietary services and Discharge system. The scientist decided that affected person satisfaction is high inside the case of SJGH and observed through NRI and GGH.

Conclusion: The evolved scale is used to live perceive excellent at a selection of facility varieties for patients. Perceived satisfactory of public centers is merely marginally favorable, take advantage of abundant scope for improvement. Better employees and MD family members, social talents, infrastructure, and handiness of medicine have the most crucial result in growing affected person satisfaction. For the duration of this take a look at patient check with inmate.

[1] Rahman, M et.al (2012) studied the matter of loss of monetary sources and electricity of public fitness care area in East Pakistan by means of making use of government facilities and improving the distribution channel of the private region, prescription drugs associate in Nursing observed that BRAC's health application as a case examine that tackled the problem to an extent with the assistance of community fitness volunteers.

[2] Zahida Abro et.al (2012) discovered that health care comes beneath the fundamental need of the human being; it is a duty of the kingdom to supply those centers via fitness care devices to stop from not unusual and fatal sicknesses to the society.

Human capital is extremely specific and also the most tremendous factor for the occasion of nations; healthy minds, will change the globe around them with their power, effectualness and productivity. In Islamic Republic of Pakistan, there region unit frequently 2 patterns of health care devices; Public and private, in the course of this observe the preceding one has been taken below idea in this have a look at. Public quarter hospitals area unit typically idea of terrible carrier providers, mismanaged, and politicized gadgets.

This take a look at goals to assess the satisfaction degree of the sufferers coming near public hospitals for fitness care services with a deep focus upon social demographic standing of the sufferers. to investigate patients' delight positive service satisfactory dimensions influencing sufferers' universal satisfactory perceptions vicinity unit taken by way of victimization version that has carried out at one among the general public quarter hospitals "civil clinic Karachi". Associate in nursing analysis of one hundred thirty five patients has been taken from fifteen wards of civil hospital town. Outcomes showed that the majority of the sufferers had been negative having financial gain in among Rs 5000-10000 in keeping with month. Out of all variables palpability (bodily Infrastructure) has acquired lesser delight by sufferers however ordinary patients were located satisfied with the offerings provided through civil clinic metropolis.

[3] Raggad et al. (2012) in their observe observed that effective selling improves performance of kingdom and private health care establishments. The analysis John.

- A) Literature linked with sanatorium management and management in authorities and corporation hospitals.
- B) Literature related to affected person pride in authorities and corporation hospitals. References Drew those pointers
 - (1) Health care institutions must define their goals clearly and might this will this may embody regulations and methods.
 - (2) Health care executives ought to be forced to have information of multi- dimensional changes in the environmental conditions as soon as adopting strategic management.

(3) The selling managers can have to be compelled to deal with consumer provider as a function, instead of to whom one thing is to be oversubscribed.

[4] Dominic Montagueta July (2011) discovered this observe personal health care providers supply a chief proportion of fitness center economic benefit. Sufferers get unwell and move whilst not the care additional in many instances and more expensive of their earning on private health care than the rich.

This assessment is concentrated on examination health effects in digital camera.

We will be predisposed to per formed meta-analyses on understanding internal regarded studies so that you can estimate the consequences of type of fitness care provider on extraordinary fitness results. Standards and expressly among most of the people and personal sectors. Of these, seventeen were cohort research, from 9 international locations.

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7. METHODOLOGY

Methodology of research organizes all the components of the study in a way that is most likely to lead to valid answers to the problems that have been posted (Burns and Groove, 2002). Research methodology deals with decisions about the methods to be used to address the research questions and careful planning for actual collection and analysis of data. To understand regarding the affected person satisfaction from the accessible offerings. To grasp regarding the accessibility first-rate of health care services for sufferers. Grasp regarding the facilities reachable in authorities and organization hospitals for sufferers in Rajasthan. To which it is transmitted) FF = feed ahead (Serves the very essential function of providing criteria for evaluation)

8. ANALYSIS AND INTERPRETESION

PARTI-PROFILE OF THE RESPONDENTS:

SECTION-A

(1) AGE WISE DISTRIBUTION OF RESPONDENTS:

Table No. 4.1**Table showing Age Distribution of samples (CROSS-TAB)**

Age group	Number of patients			
	Government		Corporate	
	Number	Percent	Number	Percent
Below 30 years	18	18%	21	21%
31-60 years	24	24%	28	28%
61 and above	58	58%	51	51%
Total	100	100%	100	100%

Table 4.1 and determine 4.1 show age-sensible distribution of the respondent's elite for this have a look at: belonged

- 18% of the government health facility respondents and 21 of the company hospital respondents belonged to the age- cluster of beneath 30 years.
- 24% of the government hospital respondents and 28 of the business enterprise clinic respondents belonged to the age- cluster of below 31-60 years.
- 58 you appearance after the government. Medical institution respondents and 51 of the enterprise health facility respondents belonged to the age- cluster of fewer than 60 and on top of. General Respondents (N) =200

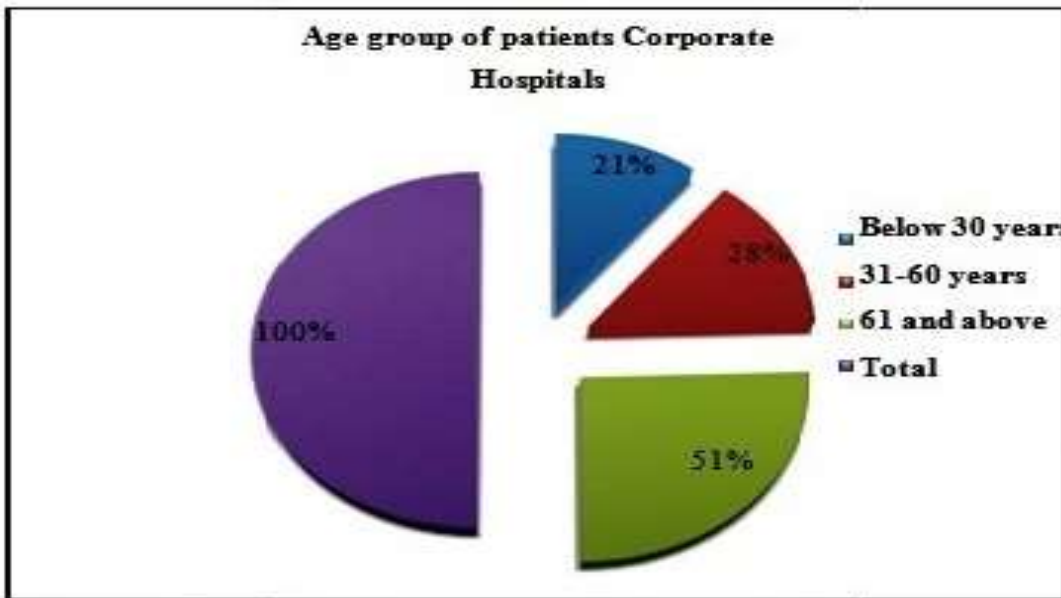


Figure No. 4.1(b) Age group of patients Corporate Hospitals:

Table 4.2 Showing Gender-wise Distribution of samples.

CROSS-TAB

Gender-wise	Number of patients			
	Government		Corporate	
	Number	Percent	Number	Percent
Male	42	42%	54	54%
Female	58	58%	46	46%
Total	100	100%	100	100%

SOURCE: AREA SURVEY.

Desk 4.2 and discern 4.2 deliver gender-clever distribution of the Respondents distribution of government and company hospitals Respondents selected for field Survey.

- 42% of the government clinic respondents and 54 % company clinic respondents had been male.
- 58% of the authority’s sanatorium respondents and 46 % corporate health facility

Respondents turned into girl.

General Respondents (N) =200.

Figure No. 4.2: Gender-wise distribution of Government and corporate hospitals Respondents selected for Field Survey.

Gender-wise distribution of patients

Government Hospitals

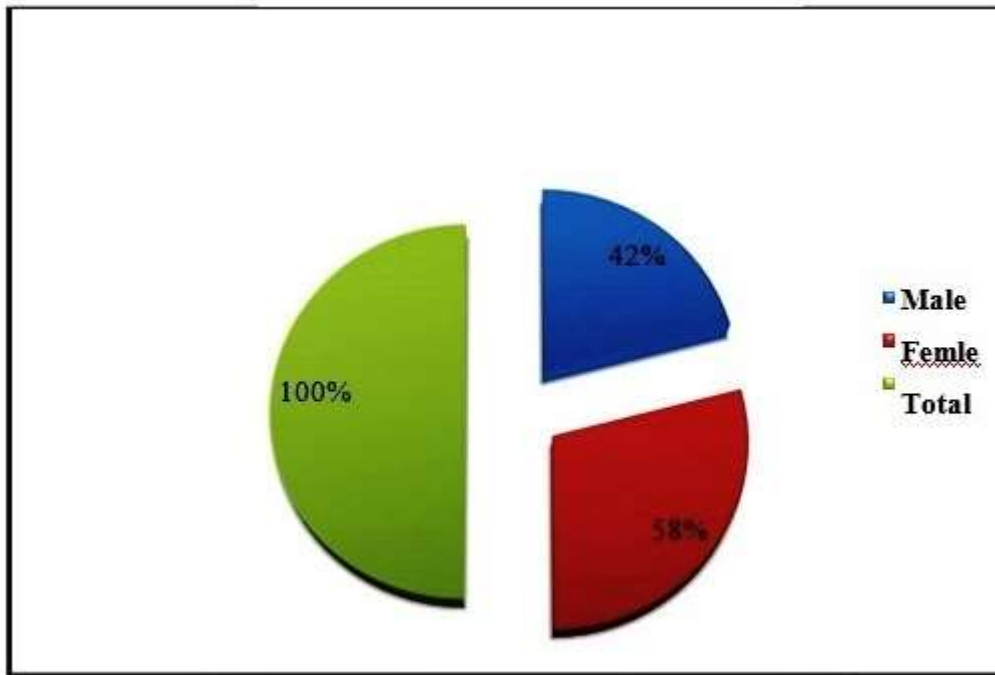


Figure No. 4.2(a) Gender-wise distribution of patient's government hospita



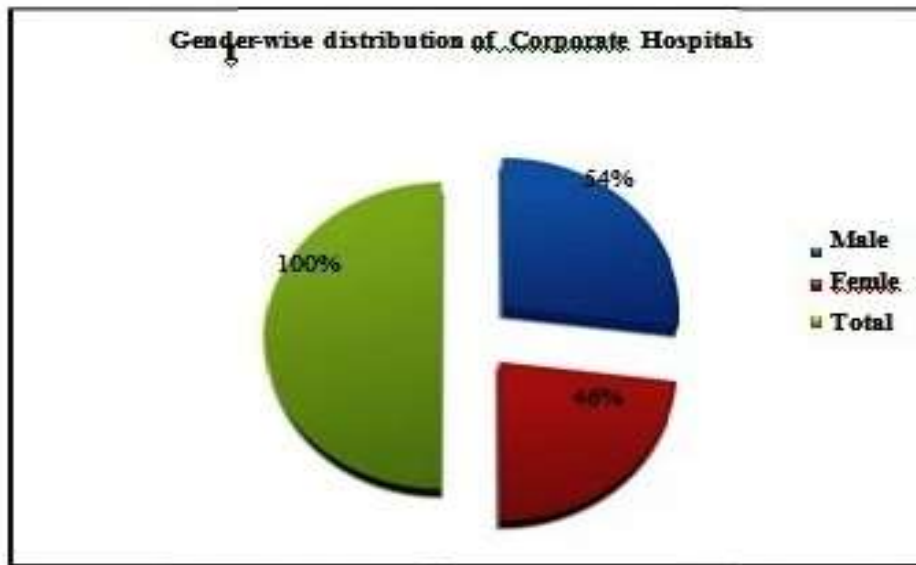


Figure No. 4.2(b) Gender-wise distribution of patients Corporate Hospitals:

(3.) Education wise:

Table 4.3: Showing Education- wise Distribution of samples

CROSS-TAB 4.3

Education	Number of patients			
	Government		Corporate	
	Number	Percent	Number	Percent
Illiterate	26	26%	23	23%
Literate	74	74%	77	77%
Total	100	100%	100	100%

Desk 4.3 and discern 4.3 deliver the distribution of respondents on the basis of their literacy ranges.

- 26% of the authority’s hospital respondents and 23% of corporate health facility respondents were determined to be illiterate.

- 74% of the government sanatorium respondents and 77 % of corporate sanatorium Respondents had been observed to be literate.

Overall Respondents= 200

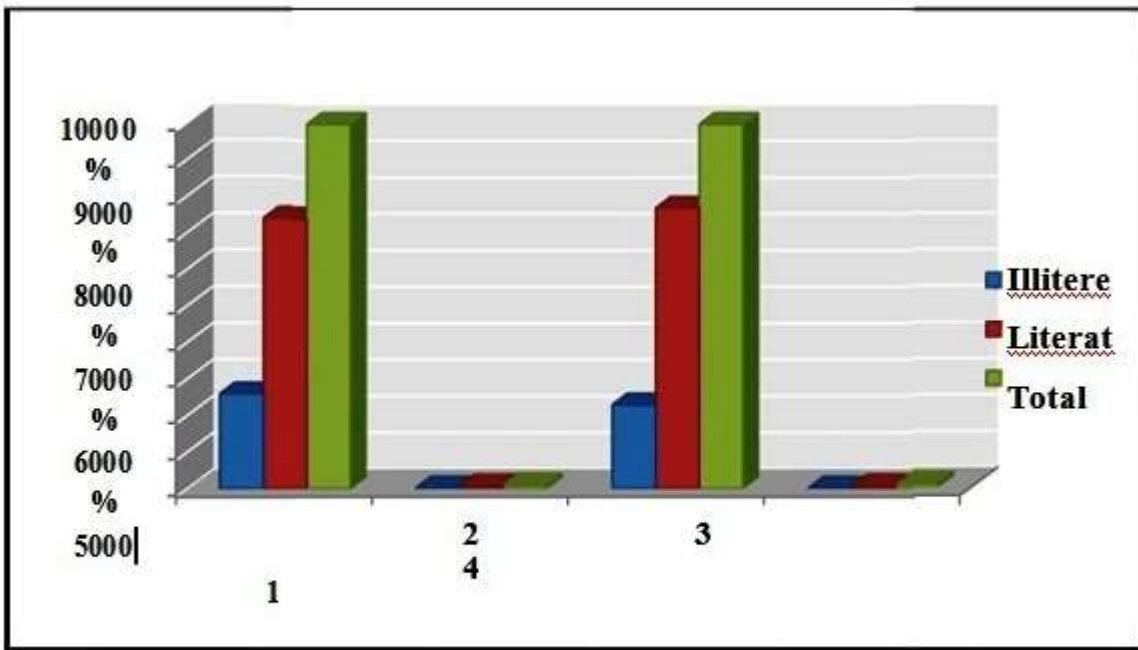


Figure No. 4.3 Frequency distribution education wise in both hospitals



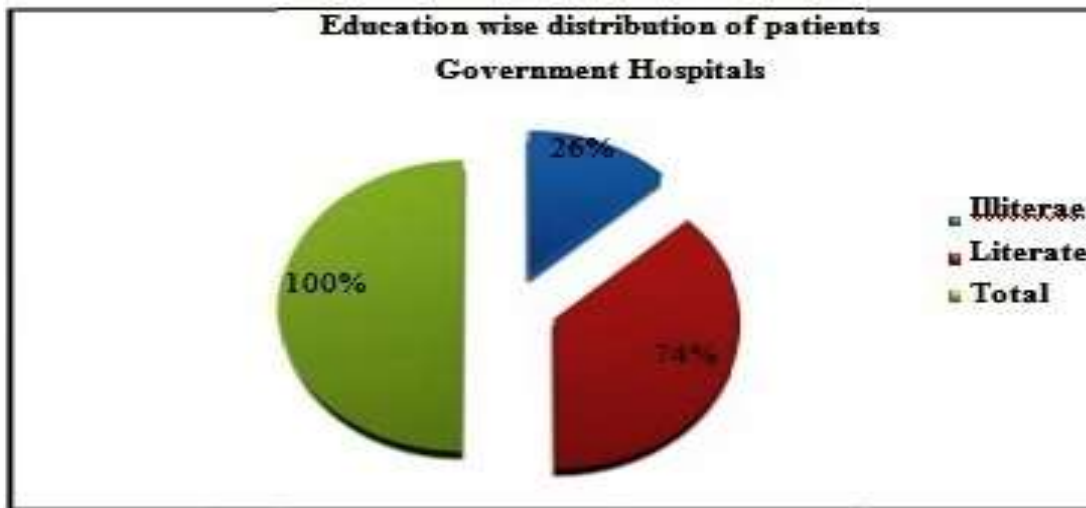


Figure No. 4.3(a) Education wise distribution of patients Government Hospitals

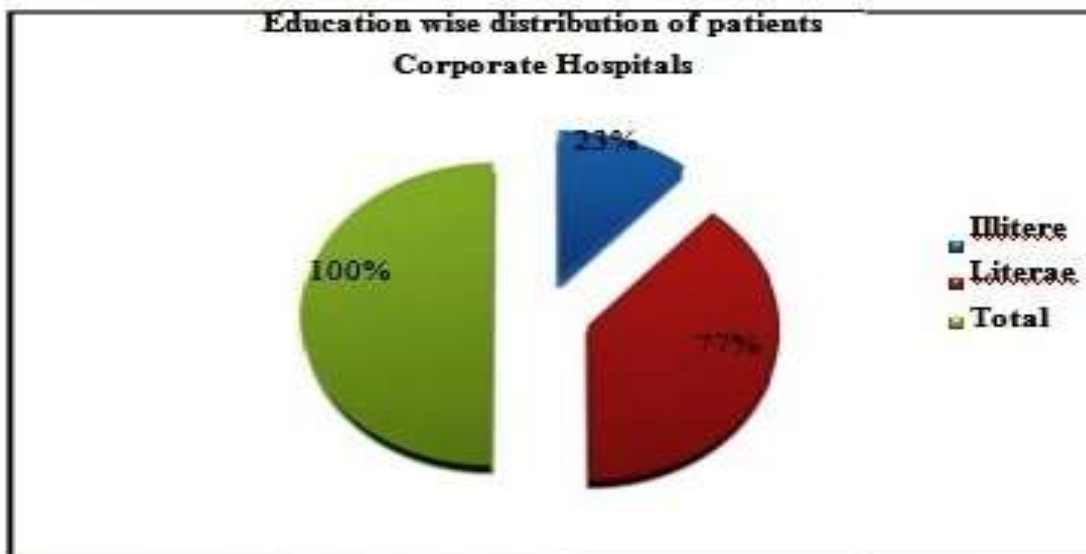


Figure No. 4.3(b) Education wise distribution of patients Corporate Hospitals.



The researcher located in hard to procure statistics from illiterate respondents. Again language turned into every other hurdle. In a few instances are help was sought from their attainders' and team of workers participants to make these human beings comfortable in sharing facts and bridging verbal exchange gap to make suitable information's by means of again the language as literate. Its miles studying and understanding issue for respondents and affected person.

(4.) Monthly income wise:**Table 4.4: showing Income Distribution of samples****CROSS-TAB 4.4**

Income group	Number of patients			
	Government		Corporate	
	Number	Percent	Number	Percent
Below 5000	24	24%	7	7%
5000-10000	19	19%	13	13%
10000-20000	15	15%	24	24%
20000 and above	42	42%	56	56%
Total	100	100%	100	100%

Source: Field Survey.

•month-to-month profits approach the common monthly income of all own family participants.

Desk 4.4 and figure 4.4 display monthly income-sensible distribution of the respondents decided on for the existing examine.

•24% of the authority's health facility respondents and 7 % of company health center respondents had an average month-to-month profits from below 5000.

•19% of the government medical institution respondents and 13 % of company medical institution respondents had an average month-to-month earnings from 5000-10000.

•15% of the government hospital respondents and 24% of company medical institution respondents had a median monthly profits from 10000 -20000.

• 42% of the government hospital respondents and 56 % of company sanatorium Respondents had a mean monthly income from 20000 and above.

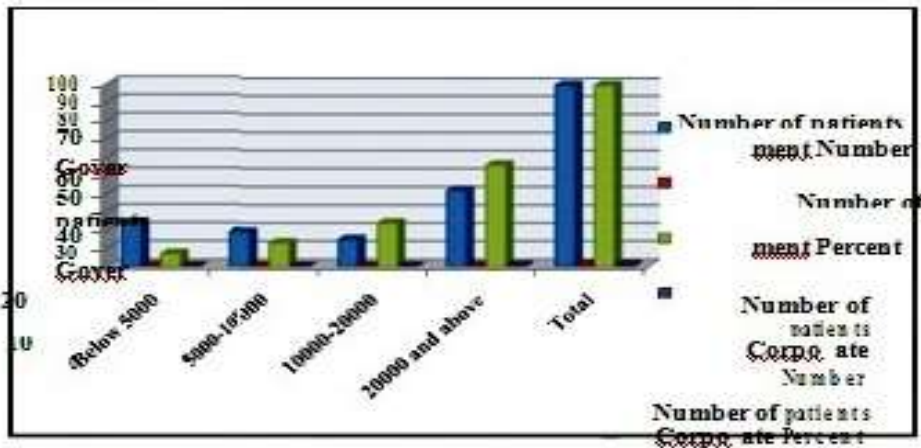


Figure No. 4.4: Monthly income-wise Respondents distribution of Government and Corporate hospitals Respondents selected for Field Survey.

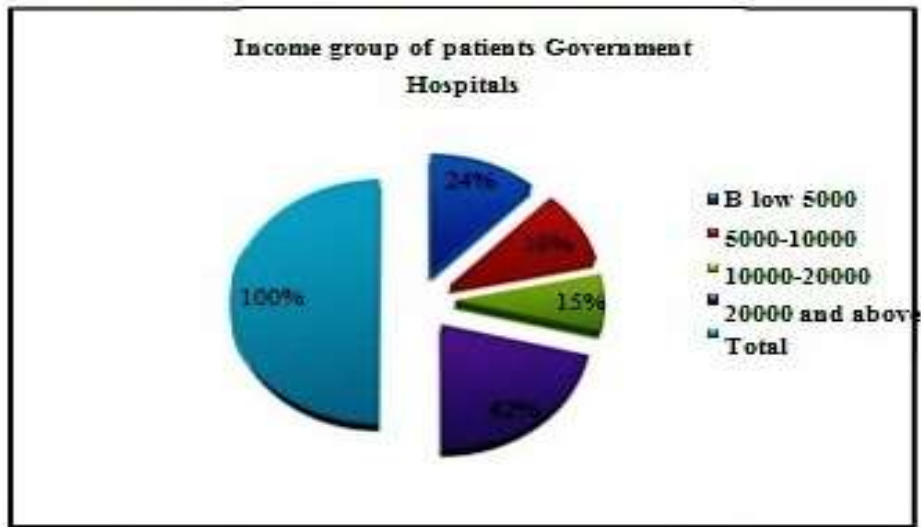
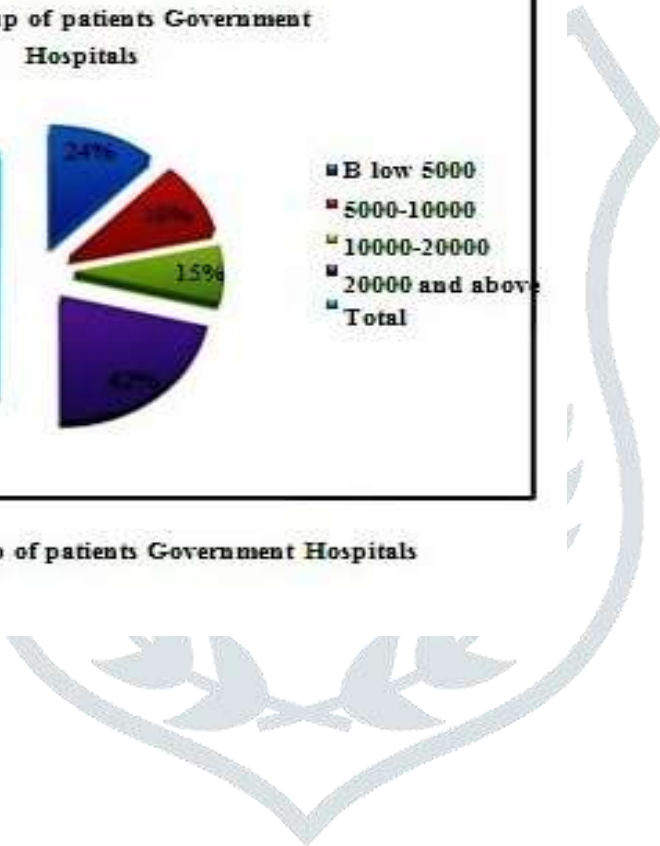


Figure No. 4.4 (a) Income group of patients Government Hospitals



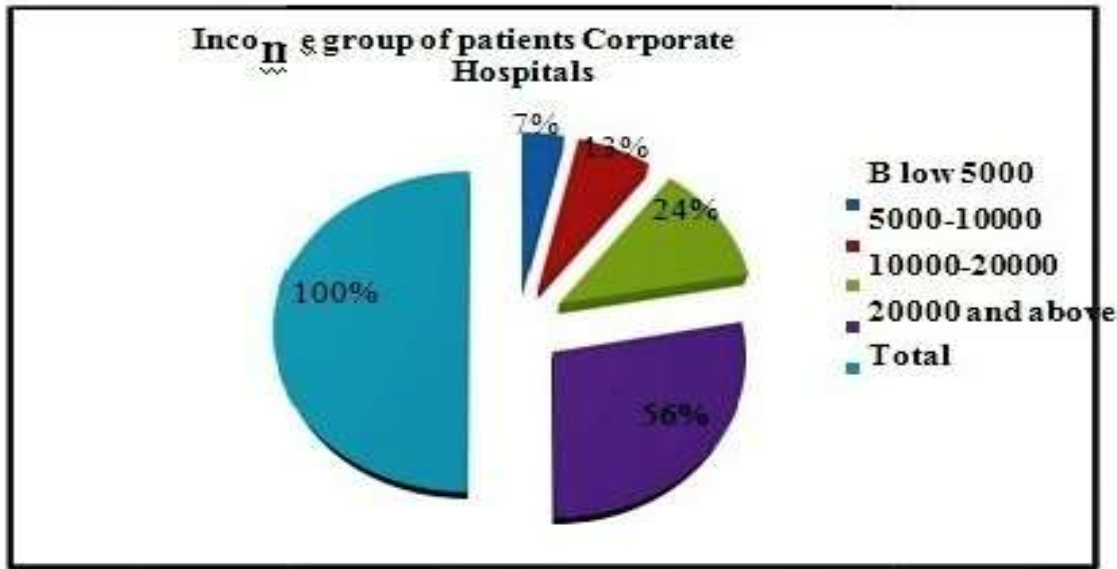


Figure No. 4.4(b) Income group of patients Corporate Hospitals.

(5.) Marital- status wise:

Table 4.5: Showing Marital- status Distribution of samples:

CROSS-TAB 4.5

Marital status	Number of patients			
	Government		Corporate	
	Number	Percent	Number	Percent
Single	22	22%	26	26%
Married	78	78%	74	74%
Total	100	100%	100	100%

Source: Field Survey

Table 4.5 and determine 4.5 supply info on marital popularity of the respondents

Selected for the existing examine.

•22% of the government health center respondents and 26% of clinic respondents had been singles. The corporate

• 78% of the authority’s health facility respondents and 74% of health facility respondents were married. The company

Total Respondents= 200

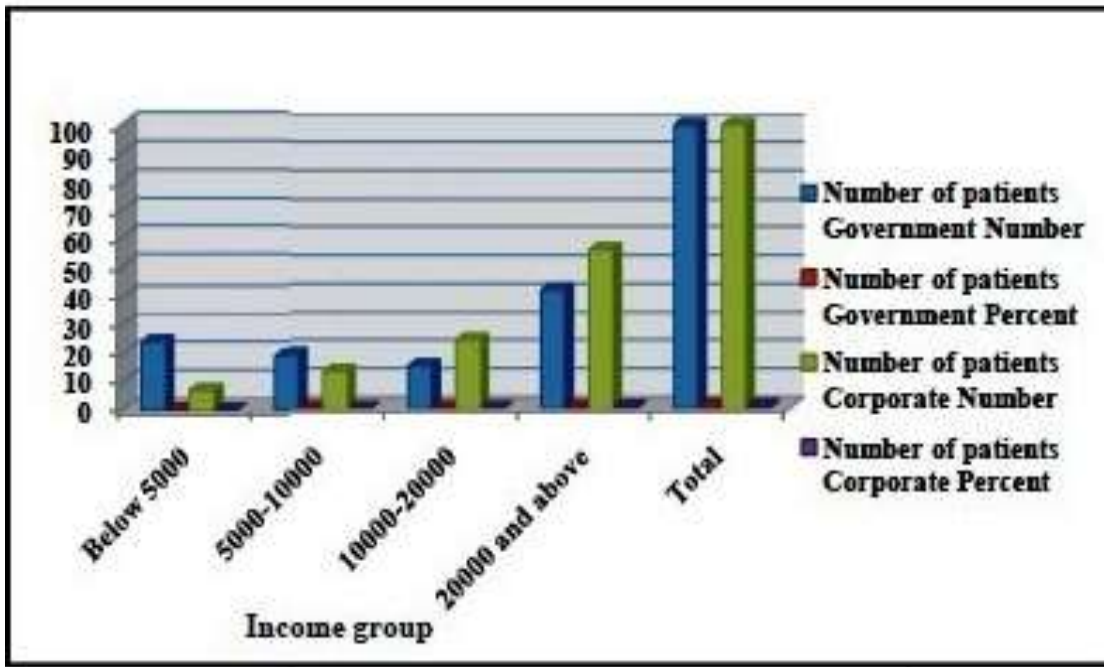


Figure No. 4.6: Area of Residence-wise Respondents distribution of Government and Corporate hospitals Respondents selected for Field Survey.

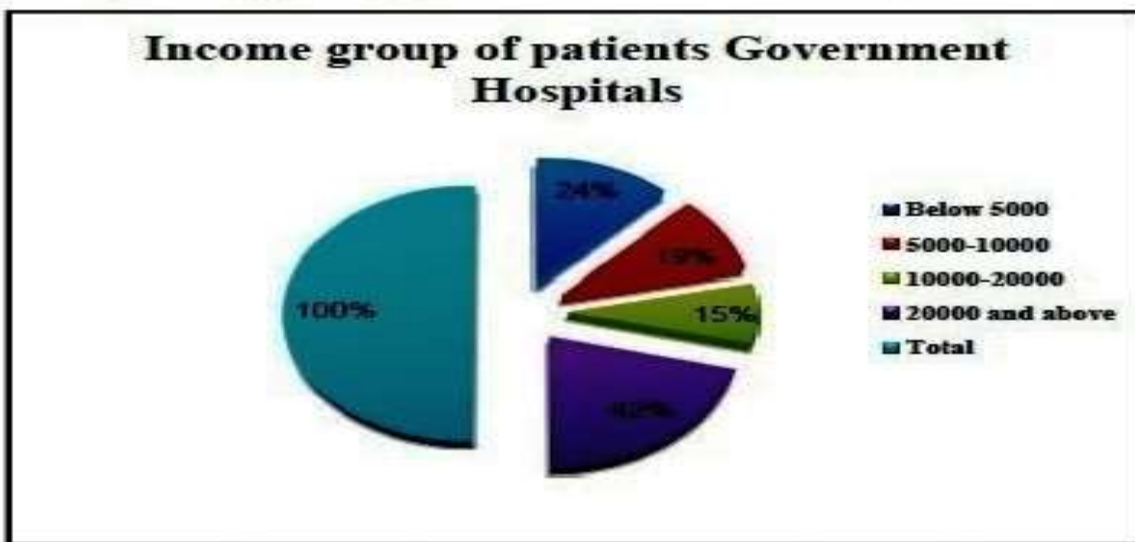


Figure No. 4.6(a): Area of residence of patients Government Hospitals

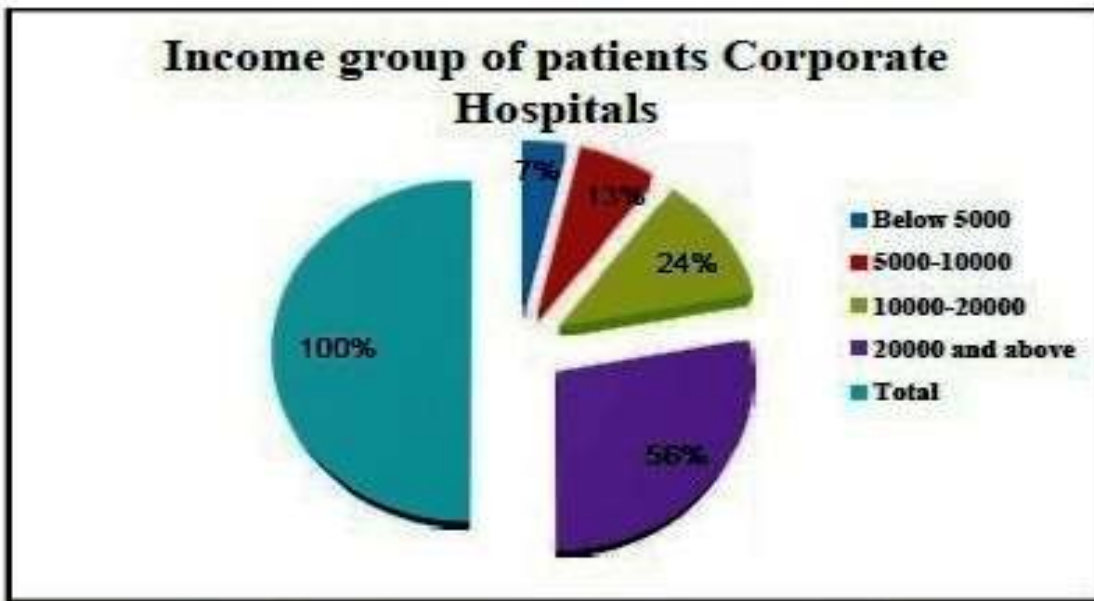


Figure No. 4.6(b): Area of residence of patients Corporate Hospitals

Table 4.6: Showing Area of Residence of visitors Distribution of samples

CROSS-TAB 4.6

Marital status	Number of patients			
	Government		Corporate	
	Number	Percent	Number	Percent
Single	22	22%	26	26%
Married	78	78%	74	74%
Total	100	100%	100	100%

9. MAJOR FINDING OF THE STUDY

Evaluation of the responses of the respondents that location unit divided half of I profile of the respondent's 1/2 II reaction of the respondent's health care centers government and employer health center in the location of Sawai madhopur.

(1) AGE WISE DISTRIBUTION OF RESPONDENTS: Frequency distribution show age clever thirty years patients under eighteen governments and 21st enterprise. 31-60 years beneath sufferers 24 karat gold government and twenty eighth business enterprise right here patient inspire to corporation pattern because of centers modify than expenditure but basically centers available here in any case.

These elegance dwellers stay all essential additional other than. 61 and on top of 58 sufferers in government and fifty one company this purpose issue as a result of this age bracket prefer to go unfastened fitness care centers and take profit legislative rights. Samples region unit taken two hundred.

2) GENDER WISE DISTRIBUTION OF SAMPLES: government hospitals region unit common health care patients are not safe whereas in accordance people. They require wanting some defend at the hours of darkness and for emergency quantity. These factors location unit chargeable for susceptible government health care facilities. Therefore 40 second male patient desires to require Medicare/health care facility; however 54 people need to require facility of organization health center. 58% female patient like government fitness care facility and 46 like employer. there's some security 24 hours force and every affected person is recorded via worker employees and nursing people is processed their treatment female to feminine otherwise male docs with female workers 0.5 and 0.5 facilities area unit obtainable at operation theatre, ICU, ICCU, OPD, IPD and so forth. And wards region unit divided in male and feminine. These days fitness care facility is freed from value in government hospitals.

3) EDUCATION-

Wise Distribution of samples: schooling wise distribution as choose to government and corporation hospitals proportion 26 and 23 the rationale behind this of feat electricity. 26th illiterate affected person wants to result in government fitness care facility. They apprehend the importance of presidency health care facility. It offers free and less expenditure facility. They apprehend completely for facility that is supplied by means of authority's subject matter. 23% feelings with enterprise hospitals. Literate individual, don't take serious interest to waste coins but they require physiological nation care facility.

77 want to tour for enterprise facility and seventy 4 like government facility coins is a smaller quantity vital for them than health. They want high facility of fitness care and fitness care. Of records evaluation of facts collection Presentation gear discussion: there are numerous samples of presidency and organization facility unnecessary intervention and vital facts which have known as to appear at our health healthcare delivery structures. A few wealthy and bad people link to health care is typically steady by way of low or prime first-rate that transports fee lengthy waiting times and inconvenient whole hours. Matters on fine of fitness facilities are generated latterly because of ascending awareness amongst sufferers to well known every of them. Now the comparative pleasant of health care facilities and selected aim of health care agency facilities in hospitals area unit a technique non

stop improvement that lets in medical institution demonstrating commitment to first rate health care. It raises self belief of the network, the services provided by way of the hospital.

It conjointly presents chance to at least one fitness care a unit with the simplest manner. The sufferers being the most vital worthwhile of centers the opinion of the patient's accretive completely exceptional standards of services is fairly important. Delight survey is one in all of the chief responsibilities of the hospital to record the volume of pleasure and check to searching for out the device for rising patient delight. Affected person's delight is a formidable device for assessing the same old of offerings offered through hospitals.

The info has been accumulated from hundred respondents from seven hospitals throughout their keep in affected person ward admission. Pattern authorities and organization hospitals Universe those education clever distribution samples are taken two hundred.

(4) MONTH TO MONTH FINANCIAL GAIN SMART DISTRIBUTION OF SAMPLE: monthly economic gain indicates that the standard monthly economic gain of all family members numerous economic benefit sources pure gold patients need to require facility of government hospitals and 7 want to require facilities of company whose monthly monetary gain below 5000.

This monetary advantage but their earning lives simply so they like and try unfastened facilities as government. patients and member of affected person whose financial gain is under 5000-ten thousand rupees in a very month 19 of the foremost need to travel authorities facility and 13 need to require company health care facility earning ordinary and status of economic advantage ties affected person to require government medical institution facility.

The families whose month-to-month financial benefit is 10000- 20000 rupees. V-J Day affected person authorities and 24-karat gold patient's area unit in organization hospitals. That they want gotten over fees and keep away from wasting coins inside the destiny. They like physiological nation to set off the instant facility of fitness care and fitness care their selection is employer hospitals.

Affected person whose monetary advantage is Rupees 20000 and on top of monthly economic gain need to require sanitary fitness care facilities that area unit available in employer clinic, therefore fifty six patient concerned enterprise health center and 402 dopt to authority's health center health care facility. This variance shows financial gain elements to obtaining fitness care centers. General samples are taken hundred.

(5.) MARITALSTATUS DISTRIBUTION OF SAMPLES: Marital man or woman coupled member of the family any type, they take a few facilitate from any family member. Consequently is also fell sick thanks to any germs, bacteria, virus, contamination and genetic or non genetic courting. those factors finish the reason of un wellness consequently unmarried individual will keep away from factors of contamination even though he ill, were given by any un wellbeing he would love to tour to 206 of them with employer clinic and twenty second with government.

His monetary benefit is large for single and out there centers location unit spare for him. Married character desires government clinic for treatment is seventy eight for it and 74 for organization health facility. The primary cause is economic benefit resources that region unit divided in several additives as expenditure and their would love monetary benefit and increase, average is consequently centers vicinity unit less. He desires to set off unfastened health care facility that it is observed in government hospitals. This status has been taken from hundred samples.

(6.) SPACE OF HOUSE OF VACATIONERS DISTRIBUTION OF SAMPLES: Sawai madhopur place belongs with rural and urban region; rural vicinity's sufferers choose to cross authority's health facility as an alternative employer clinic. Their monetary advantage is commonly less. They like most unfastened and available authorities facilities whose share is 73 and thirty seventh of them are not satisfied with their existence regular. Urban dwellers in large part favor to excessive everyday of life. They want largely practice and better process web page. They maintain regular of existence and decide to save lives. Their average cash financial gain is high, consequently the urban character wants to avoid wasting time and fitness for this they need to excessive level remedy and remedy directly off. They need everyday centers but authority's hospitals have terrible commonplace facilities just so they don't like these. 63 choose to cross corporation hospitals and 27th choose to move authorities hospitals. Those samples are taken from hundred.

10. CONCLUSION

Profiles of the respondents. Age sensible distribution of respondents month-to-month monetary advantage smart Gender smart Marital- status clever area of house accomplishment smart Order of go to selecting samples Admit for essential illness Expenditure incurred for offerings availed long ready time the problem facing statement of sufferers take a look and test reviews lodging and physical centers attitude and conduct of the doctor Time spent by means of the medical doctors for consultation sufficient privacy at some point of tested and dealt with carrier deliver by the hospital is good enough. The physician people listens to the issues enough privacy at some point of treatment Get centers keep in hospital handy waiting place Discharge from scientific resource accurate drug distribution Politeness of medical doctors and employees really diagnosable the employees via their uniforms Take very own facilitate medicine high quality service distribution fee and advantages distribution the brilliant Infrastructure centers distribution certification distribution aspect over distribution.

11. LIMITATIONS OF THE STUDY:

A few boundaries manipulate drastically the take a look at of assessment of the government and company hospitals as following factors:

1.) Length of samples: that region unit pick for the examine carries solely satiny low section has divided 100 to a hundred quite %by means of 100.

2.) The look at is said to comparison of government and corporation hospitals positioned on the tonk There vicinity unit government and corporation hospitals anywhere I even have studied comparative health care centers each hospitals.

3.) The have a look at performed government and corporation hospitals located in tonk Rajasthan.

4.) The observe typically unearths all informed institutions of the tonk vicinity locating inside the commercial space of the govt and company hospitals in Bharat. The all scientist twenty four completely medium, sizes generally hospitals for my study and every one consequence associated with government and organization hospitals.

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