

A STUDY ON PATIENT SATISFACTION AND PERCEPTION TOWARDS HEALTH CARE FACILITIES WITH SPECIAL REFERENCE TO JAMMU AND KASHMIR

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Abstract: This study is based on the analysis of customer satisfaction in the hospitals of Kashmir division of J&K State. The Customer/Patient satisfaction and service quality is important concepts to hospital industry. It is therefore important for hospitals to know how to measure the patient's satisfaction and more critical of the quality of service they experience. The service quality offered by government hospitals on various dimensions is discussed in this study and how it can be applied in the context of various other hospitals. The data used were gathered from in-patients of government hospitals in the Kashmir division of J&K State. The purpose of the research is to identify patient's satisfaction towards various dimensions that influence the quality of service in the government hospitals of Kashmir division of J&K State. An efficient and committed administration, working closely with dedicated staff can make govt. hospitals excellent centers of health care. Similarly, eminent people with professional management experience should be invited to participate in hospital management. Using a sample of 50 respondents, a self-completion questionnaire was given to in-patients in government hospitals, to determine their satisfaction of service quality in government hospitals. The results show that patient's satisfaction is rather low and that there is still a room for government hospitals to improve on their performance.

Keywords: Hospital services, Patient satisfaction, Clinical care, Responsiveness and reliability.

I. INTRODUCTION:

Patient satisfaction is a measure of the extent to which a patient is concerned with the health care which they received from their health care provider. In evaluations of health care quality, patient satisfaction is a performance indicator measured in a self-report study and a specific type of customer satisfaction metric. Patient satisfaction is one of the important goals of any health system. The quality of service in health means an inexpensive type of service with minimum side effects that can cure or relieve the health problems of the patients. Patient satisfaction depends up on many factors such as quality of clinical services provided, availability of medicine, behavior of doctors and other health staff, cost of services, hospital infrastructure, physical comfort, emotional support, and respect for patient preferences. Patient satisfaction is increasingly considered to be one of the most important factors in the measurement of quality of medical care. Monitoring consumer satisfaction of health care is an important input to improving the quality of health services. Patients' priorities and views on quality care are well-documented in Western countries but there is a dearth of research in this area in developing countries like India. Health care organizations are operating in an extremely competitive environment, and patient satisfaction has become a key to gaining and maintaining market share. Patient's satisfaction regarding medical care organizations like tertiary care hospital is important in the provision of services to patients. So the researcher has made an attempt to measure the service quality in the government hospitals of J&K. A deep study was made by the researcher in view of measuring the factors relating to their satisfaction towards the quality of services provided by the health sector. This study will throw a highlight of getting an insight into the patient's satisfaction towards government hospitals of Kashmir.

II. LITERATURE REVIEW:

As mentioned earlier, there is hardly any work done in the area of service quality in health sector. However, there are researchers like Parasuraman, Carman, Iehitinen, Babakus, Reidenbach and Smallwood etc who have contributed the field. Parasuraman conceptualized the idea of service quality based on disconfirmation paradigm and proposes that service quality is the discrepancy between perceived and expected services. He developed SERVQUAL model consisting of five dimensions: reliability, tangibles, responsiveness, assurance and empathy. Vandamme and leunis (1993) developed a scale to measure service quality provided by hospitals from patient's point of view in general. They conclude that tangibles, medical responsiveness, assurance, nursing staff quality and personal beliefs and values are important dimensions of service quality. Factor analysis by Andleeb (1998) puts forth that communication; cost, facility and competence are the key dimensions of service quality. Several other authors have used SERVQUAL model for measuring service quality in different sectors. SERVQUAL model has been used in other sectors as well. Al-Hawari (2008) found tangibles and empathy are the two important dimensions in banking sector. Responsiveness and knowledge are important dimensions in hotel sector. Reidenbach and Smallwood (1990) conduct factor analysis and operationalized service quality in terms of treatment quality, support services, patient confidence, physical appearance, waiting time and empathy. Several other researchers developed their own models to conceptualize service quality in hospital services. Carman (2000) has identified two components in hospital sector viz. technical and interpersonal aspect. Nursing care, outcome, and physical care constitute technical aspect while as food, noise; cleanliness and parking are parts of interpersonal aspect. Hasin et al found that communication, responsiveness, courtesy, cost and cleanliness are the components of service quality in hospitals. Tucker and Adams (2001) have taken caring, empathy, reliability and responsiveness as dimensions in US hospitals.

OBJECTIVES OF THE STUDY:

- To study the patients' satisfaction towards the quality of service offered by government hospitals in Kashmir division of J&K State.
- To identify the condition of patients at the Hospital and treatment facilities;
- To examine the existing problems of J&K Hospital and the perception of patients towards the facilities of the Hospital and performance of staff.

HYPOTHESIS OF THE STUDY:

- **Ho1:** There is no significant difference between the male and female patients towards the behavior of doctors at government hospitals of J&K.
- **Ho2:** There is no significant difference between the different profession of respondents towards patient involvement.
- **Ho3:** There is no significant difference between the various educational levels towards the convenience of hospital location.
- **Ho4:** There is no significant difference between married and unmarried respondents towards the Diet services being provided in the government hospitals of J&K.

SCOPE OF THE STUDY

The study will be limited to the government hospitals of Kashmir division. This will not take into account all public hospitals operating in other two divisions namely Ladakh and Jammu of J&K State and even private hospitals are also out of box in the study. The purpose of present study is to carry out the patient's satisfaction in governments Hospitals.

METHODOLOGY OF THE STUDY**1. Nature of Study:**

This study is descriptive in nature. The study has been done in a completely natural and unchanged natural environment. Descriptive research design is a valid method for researching specific subjects and as a precursor to more quantitative studies. Whilst there are some valid concerns about the statistical validity, as long as the limitations are understood by the researcher.

2. Sampling Method:

Non probability sampling method has been used in which convenience sampling have been done.

3. Collection of data:

Data has been collected through structured questionnaire. Responses have been collected on likert's five (5) point scale. Sample has been selected from population in Jammu and Kashmir.

4. Sample Size:

A sample of 50 respondents, from Indore patients and their attendants has been selected.

5. Statistical tool:

The data collected, has been key punched in spread sheet and Statistical SPSS software used for analysis and appropriate tool like t-test and One Way ANOVA were used for the analysis.

LIMITATIONS OF THE STUDY:

This is only a baseline study with a lesser sample, which was carried out for evaluating hospital services as it was a self-funded project. A continuous ongoing process of evaluating the services at the time of discharge is required for getting definitive results. We believe the scores obtained from the present study can serve as baseline against which to compare the results from future surveys

SERVICE QUALITY IN HOSPITALS OF JAMMU AND KASHMIR

A hospital is an institution of health care providing treatment with specialized staff and equipment, but not always providing for long-term patient stay. Today hospitals are centers of professional health care provided by physicians and nurses. There are several kinds of hospitals. The best-known is the general hospital, which is set up to deal with many kinds of diseases and injuries, and typically has an emergency ward to deal with immediate threats to health and the capacity to dispatch emergency medical services. A general hospital is typically the major health care facility in its region, with a large number of beds for intensive care and long-term care, facilities for surgery and childbirth, bio assay laboratories, and so forth. Larger cities may have many different hospitals of varying sizes and facilities. Hospital services are different and distinct from boarding and grooming services-yet both are easily accessible. Patients just come for diagnosis and/or therapy and then leave (outpatients), but some others stay the nights (inpatients). Putting the patient first is a challenge that requires not just a huge change in the mindset of all the stakeholders in health care provision, but also the means by which to measure the levels of satisfaction of patients, and to discover what matters to them before, during and after their visit to any hospital. Patient quality initiatives, with their softer, experiential focus than clinical audit, with its precise and scientific methods of measurement, demand different measurement techniques.

Customers perceive services in terms of quality of service and how satisfied they are with their overall experience. These customer oriented terms quality and satisfaction have been the focus of attention for executives and researchers alike over the last decade or more. Companies today recognize that they can compete more effectively by distinguishing themselves with respect to service quality and improved customer satisfaction. Service quality is a critical element of customer perception. In the case of pure services, service quality will be the dominant element in customer's evaluations. In case, where customer's service or services are offered in combination with physical product, service quality may also be very critical in determining customer satisfaction.

PATIENT AS A CONSUMER:

Marketing experts are aware that consumers make their decision about utilization of services on the basis of their perception of the service rather than the reality and hence marketing and patient satisfaction have become of paramount importance as mouth to mouth publicity and personal referral is the most common and influential cause of using a particular health facility. Healthcare facility is very difficult to measure; hence, it is a challenge to a healthcare provider to induce patient's perception of quality of care. A patient's satisfaction may not be totally influenced by the quality of care. A patient's satisfaction may not be totally influenced by the quality of physician available, but it reflects how the medical care has been delivered. To provide highest level of satisfaction that is profitable to both the patient and the provider, management must control both the perception of expectation and the quality of delivery of the healthcare services.

Knowledge of expectation and the factors affecting them, combined with knowledge of actual and perceived healthcare quality, provides the necessary information for designing and implementing programs to satisfy patients.

PATIENT EXPECTATION AND SATISFACTION:

The satisfaction of patients coming to hospitals depends on the structure and function of the medical care system. The functioning of medical care system is based on the various social, technical and physical aspects. The structure of the medical care system is guided by the policies of the government and the type of government setup prevailing in the country, whereas the functioning mainly depends on those who manage the system. In a welfare state like India, where the government takes up the responsibility of providing free medical care to those who are unable to afford it, free consultation, medicines and treatment facilities have to be provided. Those receiving these kinds of services may be satisfied with whatever services are being provided to them in the hospitals because they are free of cost. But, as soon as they come to realize that it is their right to receive these services and it is the responsibility of government to look after their well-being, when they cannot afford, rise in their level of expectations is uncontrollable.

MEASURING SATISFACTION:

Although the customer oriented companies seek to create high customer satisfaction that is not its main goal. If the company increases customer satisfaction by lowering its price or increasing its services, the result may be lower profits. The company might be able to increase its profitability by means other than increased satisfaction. Also, company has many stakeholders, including employees, dealers, suppliers, and stockholders. Spending more to increase customer satisfaction might divert funds from increasing the satisfaction of other partners. Ultimately, the company must operate on the philosophy that it is trying to deliver a high level of customer satisfaction subject to delivering acceptable levels of satisfaction to the other stakeholders, given its total resources.

OBSERVATIONS:

The study about patient satisfaction was conducted by circulation of structured questionnaires amongst 50 patients and relatives of private and general wards.

The questions asked were about the process of patient getting admitted, their reception in the ward, room preparation, behavior of doctors, nurses, orderlies, food services, cleanliness of toilet, etc. The questions were given same scale from excellent to poor for uniformity of comparison. There were two open ended questions for their opinion about the problems and suggestions for improvement of services.

- **Admission and Reception:**

There is a procedure of issuing only one attendant's pass. However, if a patient is sick or attendant is a lady and the attendant has to go out to get anything, etc. then he has problem. About 14% patients were found extremely satisfied, 49.66% satisfied, 25% average, 11.4% were found dissatisfied. None of the patients were found extremely dissatisfied.

- **Room preparation at the time of admission:**

About 8.5% patients were found extremely satisfied, 39.5% satisfied, 31% average, 20.5% were found dissatisfied. As a whole, 0.5% patients were extremely satisfied with the room preparation at the time of admission

- **Briefing about policies, rules and regulations:**

About 2% patients were found extremely satisfied, 58% patients feel very good, 26% patients respond it as average. About 12% of them said it to be poor. So, on a whole, only 2% people were extremely dissatisfied with the briefing about rules and regulations at the time of admission.

- **Behavior of Doctors:**

Nearly 20% patients/attendants felt it was very excellent, 38% patients felt good, 12% said it was average, 16% are dissatisfied with the behavior of senior Doctors and Only 2% patients are extremely dissatisfied with the behavior of doctors Some people felt that the doctors have become less sensitive and empathetic to their problems. The new generations of doctors should be trained in soft skills and value of empathic care must be reemphasized. However, 38.5% patients were satisfied with the overall behavior of behavior of Doctors, nurses and paramedical staff..

- **Cleanliness/Water facility/:**

About 33.3% patients/Attendants were found extremely satisfied, 40.6% patients feel very good, 12% patients respond both as average and poor. So, on a whole, only 2% people were extremely dissatisfied with the cleanliness, toilet and water facilities.

- **Privacy :**

About 36% patients/Attendants felt it was very excellent, 44% patients feel very good, 12.6% patients respond both as average and poor. So, on a whole, only 1% people were extremely dissatisfied with the privacy facilities.

- **Trust :**

About 28% patients/Attendants felt it was very excellent, 39% patients feel very good, 15% patients respond both as average and poor. So, on a whole, only 3% people were extremely dissatisfied with the trust related to the health sector of Jammu and Kashmir.

- **Patient Involvement :**

About 29% patients/Attendants felt it was very excellent, 37.5% patients feel very good, 19% patients respond both as average and poor. So,

on a whole, only 0.5% people were extremely dissatisfied with the involvement of patients in different matters. This includes various questions asked like “I was involved and informed in decisions about my care”” “The health care person listened to me”

Quantity of Doctors, Nurses, Medicine facilities:

About 24% patients/Attendants felt it was very excellent, 43.5% patients feel very good, 14.5% patients responds average and, 8% patients were found dissatisfies and only 3.5% people were extremely dissatisfied about the number of doctors, nurses and other staff. It also drafts the satisfaction level of patients/attendants about the medicines available at government hospitals of Jammu and Kashmir.

Behavior of Orderlies/Sweeper:

About 16% patients/attendants were found to be extremely dissatisfied, 24% patients dissatisfied, 20% as neutral, and 28% were found satisfied.. It was felt that there is less sensitivity about protocols to avoid cross infection amongst staff. Some people complained about the bad behavior of hospital and housekeeping attendants, although they did not give in writing. The shortage of hospital attendants for taking the patient for investigations and rehab (Physio) was also reported. On a whole, 12% people were extremely satisfied with the behavior of Orderlies/Sweeper.

FINDINGS OF THE STUDY:

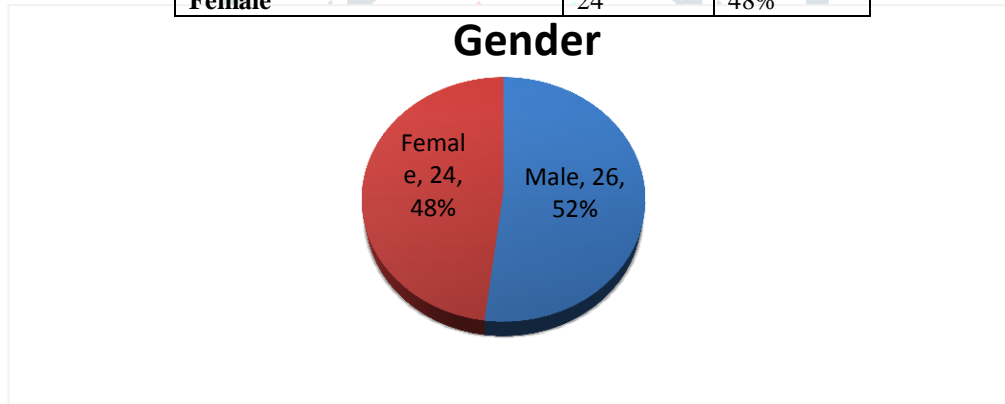
On the basis of the analysis and interpretation of the collected data, following findings have been derived from the study:

Socio-Demographic findings:

The study shows that most of the admitted patients in the government hospitals of Kashmir belong to weaker section of the society with majority in the age group of 26-30 years. Most of the admitted patients are belonging to male category 52% followed by 48% of female category. The patients belong to the deferent Professions like Government employee, private employee, business, self-employee, student, House wife with their percentage as 3%, 5%, 7%, 9%, 10% and 16% respectively. These respondents are having different qualifications like Master’s Degree, Bachelor’s degree; intermediate, high school with their percentage as 4%, 6%, 16%, and 19% respectively. The percentage of Illiterate respondents is 5%. These findings are drafted in the Table and Figures also. The ratio of married and unmarried respondents is 66:34%.

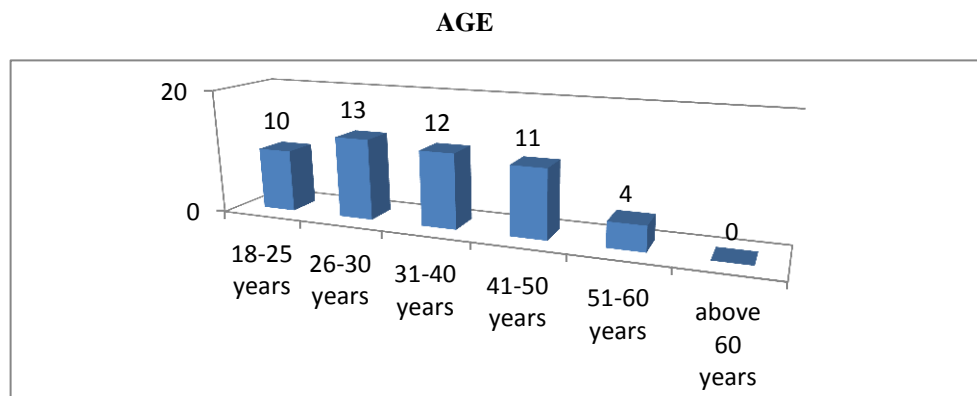
GENDER

Gender	Frequency	Percentage
Male	26	52%
Female	24	48%



AGE

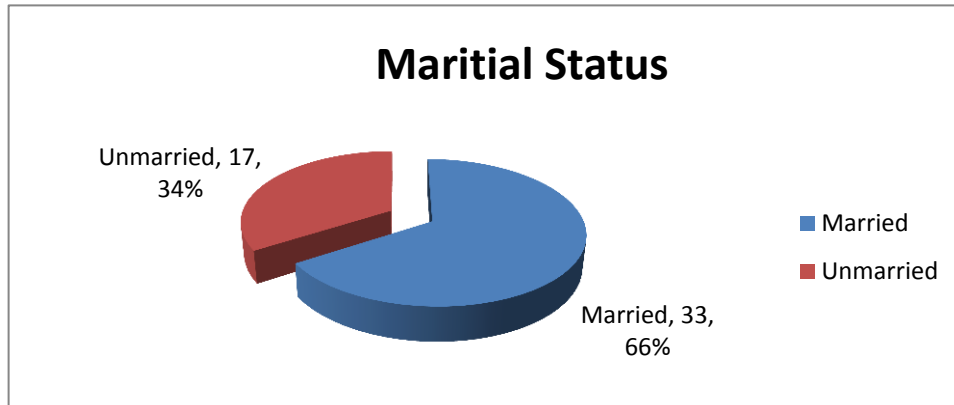
Age	Frequency	Percentage
18-25 years	10	20%
26-30 years	13	26%
31-40 years	12	24%
41-50 years	11	22%
51-60 years	4	8%
above 60 years	0	0%



Marital Status

Marital Status	Frequency	Percentage
Married	33	66%
Unmarried	17	34%

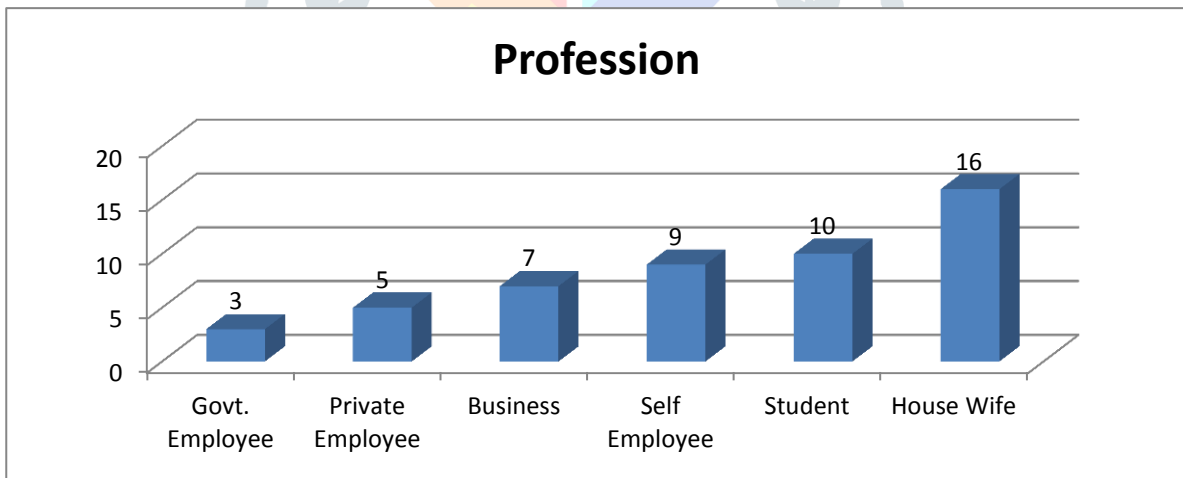
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Profession

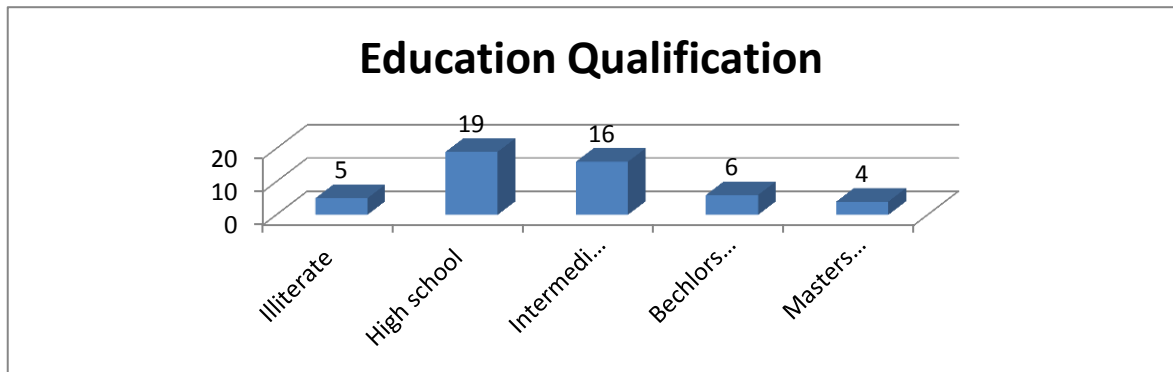
Profession	Frequency	Percentage
Govt. Employee	3	6%
Private Employee	5	10%
Business	7	14%
Self-Employee	9	18%
Student	10	20%
House Wife	16	32%

Profession



Educational Qualification

Educational Qualification	Frequency	Percentage
Illiterate	5	10%
High school	19	38%
Intermediate	16	32%
Bachelor's Degree	6	12%
Master's Degree	4	8%



Data Analysis and Interpretation:

- **Ho1:** There is no significant difference between the male and female patients towards the behavior of doctors at government hospitals of J&K.

Group Statistics

	GENDER	N	Mean	Std. Deviation	Std. Error Mean
Behavior of Doctors	1	26	3.4231	.74756	.14661
	2	24	3.2500	.58977	.12039

Independent Samples Test

	Levene's Test for Equality of Variances		t-test for Equality of Means						
	F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper
Behavior of Doctors	1.808	.185	.904	48	.371	.17308	.19151	-.21199	.55814
			.912	46.902	.366	.17308	.18970	-.20858	.55473

INTERPRETATION:

Since the significant value (0.371) calculated through T-test is greater than 0.05 and it can be said that our hypothesis is accepted. Therefore there is no significant difference between the male and female patients towards the behavior of doctors at government hospitals of J&K.

- **Ho2:** There is no significant difference between the different profession of respondents towards patient involvement.

ANOVA

Patient Involvement

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	.151	5	.030	.068	.997
Within Groups	19.450	44	.442		
Total	19.601	49			

INTERPRETATION:

Since the significant value (0.997) calculated through ANOVA is greater than 0.05 and it can be said that our hypothesis is accepted. Therefore there is no significant difference between the different professions of respondents towards the patient involvement in government hospitals of J&K.

- **Ho3:** There is no significant difference between the various educational levels towards the convenience of hospital location.

ANOVA

Convenience of Hospital Location

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	.563	4	.141	.266	.898
Within Groups	23.782	45	.528		
Total	24.345	49			

INTERPRETATION:

Since the significant value (0.898) calculated through ANOVA is greater than 0.05 and it can be said that our hypothesis is accepted. Therefore there is no significant difference between the various educational levels towards the convenience of hospital location.

- **Ho4:** There is no significant difference between married and unmarried respondents towards the Diet services being provided in the government hospitals of J&K.

Group Statistics

	Marital Status	N	Mean	Std. Deviation	Std. Error Mean
DietServices	1	33	3.3030	.77962	.13571
	2	17	3.6824	.58335	.14148

Independent Samples Test

		Levene's Test for Equality of Variances		t-test for Equality of Means						
		F	Sig.	t	df	Sig. (2-tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
								Lower	Upper	
Diet Services	Equal variances assumed	1.229	.273	-1.764	48	.084	-.37932	.21500	-.81160	.05296
	Equal variances not assumed			-1.935	41.445	.060	-.37932	.19605	-.77512	.01648

INTERPRETATION:

Since the significant value (0.084) calculated through T-test is greater than 0.05 and it can be said that our hypothesis is accepted. Therefore there is no significant difference between married and unmarried respondents towards the Diet services being provided in the government hospitals of J&K.

PROBLEMS:

From the above study of services provided and perception of the patients towards the health care facilities by government hospitals, it was found that the patients have to face lots of problems in the hospital. The problems faced by the patients related to the services provided by the hospital are listed below:

- Insufficient number of staff nurses and ward attendants;
- Late admission of patients in the ward/hospital due to limited number of beds, i.e. overcrowding;
- Insufficient lab facilities and lack of proper working medical equipment as compare to number of beds in the hospital;
- Delay response in case of emergency and time taken in initiation of treatment;
- Delay and unreliable investigation results of the laboratories;
- Lack of basic amenities like drinking water, food, fans, lights etc.;
- Insufficient visits of senior doctors or consultants and insufficient time devoted by the doctors and nurses to their patients;
- Lack of efficiency in medical staff which also includes absence from duty;
- Unhygienic conditions of wards and toilets;
- Insufficient number of sign boards and lack of instructions for patients to identify or locate labs, wards, blood bank etc. in the hospital;
- Lack of privacy of patients and poor facility of waiting rooms for the attendants and the relatives of the patients.

RECOMMENDATIONS:

The current study recommends few of the remedies that would assist to hamper the miseries and augment the privileges to common patients in the public hospitals. On the basis of the perception of the respondents and findings of the study, it is recommended that the government should increase the budget for healthcare facility and construct more wards and offices within the hospital campus and make necessary repair in the existing buildings. To ensure better and qualitative health services, it is very much necessary to bring enough, competent and skill manpower in the hospital.

The government must admit that majority of doctors are more inclined towards their private practice and some leave government hospitals to make more money. There should be a proper and strict check and balance on such culprits who intentionally prefer the private clinics rather than the hospitals. In addition, the skilled doctors and practitioners should be appointed to increase the quality of treatment and favor of the patients. To avoid the frustrations of medical staff with non-working equipment, the procedures should be curtailed and it should be ensured by the authorities that only medicines and equipments of standard qualities are made available. An efficient and committed administration, working closely with dedicated staff can make govt. hospitals excellent centers of health care. Similarly, eminent people with professional management experience should be invited to participate in hospital management.

On interaction with patients and their attendants, following suggestions came out for improvement:

- **Admission:**

There is procedure of issuing only one attendant's pass. However, if a patient is sick or attendant is a lady and the attendant has to go out to get any medicines, etc. then he has problem. The policy of issuing at least two passes may have to be reconsidered.

- **Room preparation:**

There were many complaints of cockroaches and rodents in the ward. The pest control department should do regular sprays and take effective measures for controlling them. Room preparation should be improved by more cleaning, antipest and antierodent measures.

- **Nurses' Behavior:**

Due to high demand, low supply and poor salary, there is always shortage of nurses. Hence, the working number of staff nurses has decreased. This has started showing in their efficiency and behavior. More number of staff nurses should be posted for patient care. Management should devise methods and increase salary to attract and retain good nurses.

- **Toilets:**

The cleanliness of toilets should be improved. It may be done twice a day.

CONCLUSION:

It has been concluded from the data analyses and literature that majority of local people are dependent on public sector hospitals in the research area with respect to health problems. There are difficulties that are faced by patients and their attendants. Hospital staff is frustrated as well due to lack of facilities and extra workload. Majority of the respondents were found to be disappointed with the facilities of the hospital and performance of staff.

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