

A Research Study to Determine Patient Satisfaction Level in Terms of Quality of Service

(01 Feb-30 April2019)

Dissertation Report Submitted in Partial Fulfillment of the Requirements for the Award of

Post-Graduate Diploma in Hospital and Health Management

Batch 2017-19

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In recognition of having successfully completed his

Internship in the department of

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And has successfully completed his Project on

A Research study to Determine Patient Satisfaction Level in Terms of Quality of Service

01 Feb-30 April 2019

Sharad Mohan Singh Multispecialty Hospital, Faridabad

He comes across as a committed, sincere and diligent person who has
a strong drive and zeal for learning.

We wish him all the best for future endeavors.

Dr. Sharad Mohan



Director

Sharad Mohan Singh Multispecialty Hospital

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for S.M.S. MULTISPECIALTY HOSPITAL

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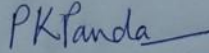
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The student has successfully carried out the study "**A Research study to Determine Patient Satisfaction Level in Terms of Quality of Service**" which was assigned to him during internship training and his approach to the study has been sincere, scientific and analytical.

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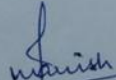
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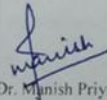
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This dissertation has the requisite standard and to the best of our knowledge no part of it has been produced from any other dissertation, monograph, report or book.



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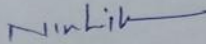
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Area of Dissertation: To Determine the Patient Satisfaction in Terms of Quality of Service.

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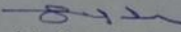
Objectives Achieved: The scholar understood the nuances of research in hospital setting.

Deliverables: The scholar applied theoretical knowledge and skills during research in a professionally managed hospital.

Strengths: Hardworking, sincere, disciplined, mature & confident.

Suggestions for Improvement: Scholar should develop creative thinking.

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**Patient Satisfaction Regarding Service Quality Aspects at Sharad Mohan
Singh Multispecialty Hospital Faridabad**

Lt Col Nikhil Kumar

Hospital Stream IHMR 2017-2019

Hospital is a unique organization which deals with the services like diagnosis, treatment and preventing diseases, illness and injuries, physical and mental impairments in human. Hospital deals with people rather than materials or products as an end. It involves emergency nature of work involving high-risk, ethical and legal issue and 24 hours of highly stressful work since lives are affected. A large number of private players are setting hospitals in India to fulfill the gap in health sector. However, these small and big corporate hospitals are mushrooming as profit making entities which have resulted in poor service quality to the patients. In today context patient satisfaction has become a key in gaining and maintaining market share. Knowledge about satisfaction with the service can serve as a performance indicator and also helps to identify areas of improvement with a view to provide better care and services for the betterment of the user's health.

The objective of the study is to determine the patient satisfaction in terms of availability of infrastructure facilities, waiting time, behavior of care provider and quality of utility services received. The study has been conducted for three months at Sharad Mohan Singh Multispecialty Hospital Faridabad, where 150 OPD and IPD patients from five departments of Medicines, Gynecology, General Surgery, ENT and Orthopedics were interviewed across all socio-economic status to include Gender, Age, education, occupation, family size, annual income and family wealth. The respondents were selected randomly and IPD patients were included after minimum 24 hours of admission. Due care was given to non-response rate. The results indicated that majority of patients were satisfied with service quality and behavior of service providers. Approximately 60% respondents were from lower middle class and 67% belonging to age bracket 18-45 years. Approximately 10% respondents were highly satisfied with the quality service and about 2% expressed dissatisfaction with services being offered.

The patients are satisfied with good service quality, good facilities & promptness in medical aid. The patients evaluate satisfaction with the remuneration paid for the services. Generally, the older people have more patience & are satisfied with good service.

Key Words Patient satisfaction, Infrastructure facilities, Utility services, Perceived satisfaction, Causes of Dissatisfaction

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I wish to convey special thanks to **Dr. Manish Priyadarshi** and **Dr. Sharad Mohan** for always being available to resolve my queries pertaining to research. Before concluding I sincerely thank all those who assisted me directly and indirectly in this work.

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ACRONYMS/ABBREVIATIONS

Serial Number	Nomenclature	Abbreviation
1	In Patient Department	IPD
2	Out Patient Department	OPD
3	Sharad Mohan Singh	SMS
4	Ear-Nose-Throat	ENT
5	Senior Secondary	Sr. Sec.
6	Graduation	Grad.
7	Post-Graduation	P.G.
8	Serial Number	S No.
9	Private	Pvt.
10	Employed	Emp.
11	Professional	Pro.
12	Information	Info.
13	Provision	Prov.
14	Speed	Spd

PART I

DISSERTATION & INTERNSHIP REPORT

(01 February-30April 2019)

Introduction

Sharad Mohan Singh Multispecialty Hospital, situated in National Capital Region Faridabad is established by experienced and professionally competent Surgeons, Doctor Sharad Mohan (ENT) and Dr Manish Chauhan (General Surgeon).The aspiring entrepreneurs commenced operations of the hospital in January 2019 with a vision to provide quality and affordable healthcare to all. The mission of SMS Multispecialty hospital is to provide health care with professionalism, excellence, integrity and innovation.

Layout of Hospital

SMS Hospital is housed in a three-floor building with present layout.

(a) Ground Floor

The hospital has reception cum registration Centre, Emergency, Gynecology, ENT, Medicines, General Surgery and Orthopedic OPD. In addition, Pharmacy, Account Department, Human Resource, Administrative Department, Sterilization Unit and Generator Room are located on the ground floor.

(b) First and Second Floors

The Operation Theatre, IPD wards, ICU, NICU and private patients' rooms are located on these two floors.

(c) Basement

It houses radiology dept, Laboratory and Physiotherapy Dept.

Staff and Services available

The hospital is headed by ENT Surgeon Dr Sharad Mohan, Director and has a permanent staff of 7 doctors, 18 nurses, 4 technicians and 8 persons of administrative staff. The security services, housekeeping and waste Disposal, laundry, mortuary and MRI services are outsourced. The newly established hospital is a 40 bedded unit which provides services of medicine, general surgery, Orthopedic, Gynecology and ENT. The hospital provides 24*7 emergency services, laboratory, radiology USG, ICU, NICU, Physiotherapy, Pharmacy and certain utility services.



Figure 1.a SMS Hospital Ground Floor

Figure 1.b ICU Facilities at SMS

Introduction

1.1 Background of the Study

Service sector is the dominating force behind all the advanced economies around the world. India is one among the nations which competes each other for getting an increased share in the world market. Since the last decade, the country has moved towards autonomy in several service sectors and outpaced industrial and agricultural sector.

In the current globalised market, people face a number of challenges in all areas of existence. To meet such challenges and to overcome such tensions one has to move on with the changing environment. The changing management practices and global economic trend towards service sector made all organizations to start developing strong customer relationships through quality services. Good quality products and services when offered to consumers at least possible cost provides utmost satisfaction and also attracts large number of customers. Today almost all the companies whether it is manufacturing or service companies, view quality of service as critical for its existence because the customers of various services have an increased awareness and expectation. This unique challenge faced by the service managers raise the significance of research in service marketing.

Health is one of the most important fundamental natural resource of a nation. Health enhances learning, ensures personal wellbeing, creates economic production, facilitates and nurture growth and bring social fulfillment. Health sector is one of the major areas in service sector as the social and economic welfare of society directly depends on the health status of its people. Recognition and elimination of health problems is one of the

main indicators in the Human Development Index.

Hospital is a unique organization which deals with the services like diagnosis, treatment and preventing diseases, illness and injuries, physical and mental impairments in human. It is one of the major infrastructural as well as service components of Indian economy. The main difference between a hospital and other organization is that hospital deals with people and not with raw materials or finished products. The health care involves round the clock work which may be of routine nature or emergency nature. The health care work involves huge risk, is very stressful since it deals with human lives and has integrated ethical and legal issues. With the advancement in health care facilities and treatments, the use of new equipment, methods and facilities have also come into mainstream. Most of the hospitals in India are able to undertake vivid complicated procedures and treat numerous diseases, this result in increased medical transactions in the country which plays an important role in economic growth.

In the changing new environment and new rules, old assumptions regarding hospitals and their role in the society are being rewritten according to the new scenario. With the role of the hospitals in society it is profound that there exists a health care concerns are about the costs and the quality of medical care, the desirability of receiving it, the fallibility of the physician, and the ability of the health care system to save people from imprudent lifestyles, unhealthy environment and individual genetic makeup.

Hospital services industry got a huge boost with the entry of corporate players. The corporate is setting up of private hospitals in cities across India and a hospital network is formed in the country. The growth of hospitals as profit motive business entities and

extensive competition with many new players in the field resulted in poor service quality as perceived by the customers. Ministry of Health introduced National Rural Health Mission (NRHM) and improved the nation's health system by raising number of hospitals in public sector. This situation made Service Quality a key differentiating factor which makes hospitals to improve their market to ensure their sustainability. So, measuring service quality is essential to a hospital's long-term success and even existence.

Patients' satisfaction leads to patients' retention and favorable word of mouth. Thus, it is important for a hospital to provide quality services to its customers and also assess patients' satisfaction. The patients of today expect personal attention, explanation of problems, assurances of relief, and redress of complaints.

Today the health care industry is competing on increased convenience to customers on a competitive low cost. The prices in health care industry are generally regulated due to growth of health insurance sector. Therefore, it becomes essential that hospitals should deliver care by increasing their mix of services and by developing more flexible distributions with a view to eradicate difficulties being experienced by their consumers in the changing environment.

1.2 Patient Satisfaction

Patient satisfaction is vital in enhancing and sustaining market share. Hospital industry is working in a highly competitive scenario and major players in hospital field use satisfaction information of their customers for making decisions. Patient's satisfaction is the state of comfort; a patient feels when his wants and needs are met as a patient from the hospital. It is a person's feeling of pleasure or disappointment resulting from comparing a service outcome in relation to his or her expectations.

Hospitals are continuously involving the perspective of their clients in planning, delivery and evaluation of health care services. Service managers of hospitals take into account patients' experiences and perceptions of the service provided to them that are largely translated into measurement of patient satisfaction. The most common reason hospitals survey consumers are to know whether they are satisfied with their care and what improvement in service they are expecting.

A feedback from the patient about the quality of service will always help the hospital authorities to identify areas requiring improvement and also enable them to provide better care and services to its consumers. Patient satisfaction will continue to remain a fundamental basis for the clinical and financial success of any health care organization irrespective of its specialty or type of care being rendered. The hospitals need to strive continuously to enhance their quality of care and fulfill patient's expectations.

1.3 Significance of the Study

Patients are the important stake holders of a hospital. The Hospital authorities must endeavour to understand their requirements with a view to fulfill them and achieve consumer satisfaction in their subsequent visits to the hospital. Aforesaid hospitals determine patients need and tailor made their services to attract patients.

Patients' satisfaction studies help the hospitals to evaluate the health care system, the quality of care provided and hospital-patient relationships. Results of patients' satisfaction studies can reveal the strength and weakness of the health care environment perceived by customers. The patient satisfaction assessment is an important indicator of organization matching the needs of the target population.

Patient satisfaction can be ascertained by persons inside the organization and outside the organization through specially designed surveys to identify the problem area and recommend remedies for its future performance. There are limited studies available in this field.

This study examines the Patients' Satisfaction at SMS Multispecialty Hospital at Faridabad. This study would provide valuable information for the management which can help them to improve the service quality rendered and can guide to better functioning of the hospital. The study would also provide them with insights into components of service quality which are related to satisfaction. The results obtained from this study can be used by the Hospital to develop actions or plans and enhance service offered to patients.

1.4 Scope of the Study

The present study examines the perception of patient's satisfaction at SMS Multispecialty Hospital at Faridabad. The study was done on inpatients and outpatients at SMS Multispecialty Hospital at Faridabad. Study covered patients in orthopedic ward, General Medicine ward, Gynecology ward, General Surgery ward and ENT and their respective OPD. The study was based on the perception of inpatients during their hospital stay/ OPD interaction in the Hospital.

1.5 Statement of the Problem

The satisfaction of customers in any service organization is of paramount importance as disgruntled customers may impact revenue loss and adversely affect long term sustainability. Hospitals are core service providers to Health care industry. Hospitals are likely to be increasingly vulnerable in health Care industry with increasing cost of treatment. Health is an indispensable one and all achievement of life depends on it. A

customer will not take risk by opting service from any hospitals; rather choose a hospital which can provide him quality service. Hospital which wins in identifying the patient requirements can be frequently selected by patients. Nowadays many hospitals are struggling to gain the confidence of patient and do some temporary solutions also. There is a need to formulate a permanent solution to provide better treatment supported by quality services to the patient.

1.6 Objective of the Study

The objective of the study is to determine the patient satisfaction in terms of quality of service.

1.7 Specific objectives

- 1) To study the satisfaction level of OPD and IPD patients regarding registration facilities.
- 2) To study the satisfaction level of OPD and IPD patients regarding consultation services.
- 3) To study the satisfaction level of OPD and IPD patients regarding nursing services.
- 4) To study the satisfaction level of OPD and IPD patients regarding dietary services.
- 5) To study the satisfaction level of OPD and IPD patients regarding diagnostic facilities.
- 6) To study the satisfaction level of OPD and IPD patients regarding emergency services.
- 7) To study the satisfaction level of OPD and IPD patients regarding infrastructure facilities.
- 8) To study the satisfaction level of OPD and IPD patients regarding medical store facilities.
- 9) To study the satisfaction level of OPD and IPD patients regarding utility and support services.

10) To study the overall satisfaction level of patients regarding quality of services as per age, educational level and income group respectively.

1.8 Definitions of Key terms used in the Study

1.8.1 Patients

Patients refer to inpatients and out patients getting treatment from the hospital.

1.8.2 Hospital Service Quality

Hospital service quality means the quality of all the services provided by the hospital in which the patient is admitted.

1.8.3 Patients Satisfaction

It is that state of mind when patients feel that their wants and needs are fulfilled with the services rendered by the hospital.

Review of Literature

2.1 Review of literature on the topic assists the researcher to know efforts of others in the area of study. In review of literature significant research studies and articles (recent and past) are examined in the light of proposed study. The measurement of patient satisfaction in relation to services provided by the hospitals is important to evaluate the effectiveness of services. The available review of literature helps to get an insight into the already conducted research work. The theoretical and empirical works relevant to the study are reviewed in this dissertation.

2.2 Andaleeb, (1998) tested a five-factor model to include communication with patients, staff competence, demeanour of staff, quality of the facilities and perceived cost which explains considerable variation in customer satisfaction with hospitals. The study was conducted in Pennsylvania with a sample size of 130. The study suggested that customer satisfaction was impacted maximum by perceived competence of staff and their demeanour, followed closely by perceived hospital cost. The communication with patients and the quality of the facilities though significant were slightly less important in explaining customer satisfaction with hospital services.

2.3 McKinnon, Crofts, Edwards, Campion, & Edwards, (1998) suggested that quality of consultations and the attitude shown by medical staff greatly impacts patient satisfaction. They found that OPD patients understand work pressure and are quite tolerant however patient feedback suggested improvement in waiting time from referral to appointment in spite of Patient Charter being in place.

2.4 Bernhart, Wiadnyana, Wihardjo, & Pohan, (1999) conducted their study to find out the patient satisfaction level in Indonesia. The data was collected from 75 patients in 11 health

centers on 3 islands. Though most of the respondents were fully satisfied, they said the facilities could be cleaner and reported incomplete dissemination of information. The factors like continuity of provider, waiting time, availability of amenities, cost and social interaction with the service provider were considered of relative low importance in determining patient satisfaction.

2.5 Sharma & Chahal, (1999) study on patients revealed that patients while selecting hospital give first preference to the efficiency of doctors. The patients for selecting hospitals rely on their prior family experience with the service provider followed by recommendations of friends and relatives. The factors which immensely contributed towards patient satisfaction included Knowledge of service provider, cooperation, interpersonal warmth, adequate and timely information, prompt services, efficiency of the staff and convenience. The top three factors that influenced overall satisfaction were professional ability of doctors, medical staff and paramedical staff.

2.6 Bhattacharya, Menon, Koushal, & Rao, (2003) found that patient perception on satisfaction on doctor's work is very high. Moderate level of satisfaction was recorded regarding the general attitude of nurses and ward servants. Technical aspect of nursing care was found satisfactory. They suggest that treatment facilities need further improvement.

2.7 Papanikolaou&Ntani (2008) assessed patient satisfaction of 367 patients with a minimum of three days stay at public hospitals in Greece through an open-ended questionnaire. The information on patients was collected regarding their gender, age, education, salary and length of stay in the hospital. The parameters assessed included overall satisfaction, satisfaction with medical and nursing staff, satisfaction with room facilities, waiting times and extra costs. The negative aspects emerged long waiting hours to get an appointment with a doctor and hospital admission after their examination. In some cases, patients had to rely on a personal nurse and

even pay extra money to the medical and nursing staff. The patients bad experience in receiving health care did not reflect in low satisfaction. In spite of considerable shortage of staff in the hospital, overall satisfaction was very high.

2.8 Pawan Kumar Sharma, Shaik Iftikhar Ahmed, Manisha Bhatia (2008) conducted patient satisfaction survey of 499 patients across 20 districts in Punjab for hospitals managed by Punjab Health System Corporation. The patient satisfaction with the services like location of hospital, diagnostic facilities and medical care was of high order. However, patients faced difficulties regarding availability of medicines, delay in diagnostic tests and laxity in emergency cases.

2.9 Sengupta & Mondal, (2009) opined that expenditure per public hospital has reduced thereby causing a downward trend in average efficiency of hospitals especially in the reform era. This situation demands immediate policy altercations to achieve efficiency and competitiveness in public health care services.

2.10 Abd Manf&Nooi, (2009) conducted an empirical analysis on clinical and physical dimension of Service Quality in public hospitals in Malaysia. The outpatient and inpatient were more satisfied with clinical dimension of service than physical dimension. There was positive correlation between waiting time and patient satisfaction for outpatients. Patient satisfaction was higher in smaller district hospitals as compared to larger state hospitals. Patients were clinically satisfied with the services of doctors and nurses and satisfied with physically dimensions of cleanliness.

2.11 Mehta, (2011) studied clinical services and physical services as the main determinants of patient satisfaction with service quality. Factors namely promptness, medical aid and patient

interest were identified for service quality and amenities. It was found that service quality and patient satisfaction were positively correlated.

2.12 Alhashem, Alquraini, & Chowdhury, (2011) collected data from 426 patients at primary health care clinics during January 2007 and May 2007 through a randomly-distributed questionnaire. They identified six factors affecting patient's satisfaction using exploratory factor analysis. The major findings were that communication between physician and patient was inadequate with respondents negatively viewed and patients in future preferred to go the emergency room instead of going to the primary care clinic.

2.13 Mahapatra, (2013) analyzed patients' perception of service quality across public and private hospitals and found private sector having an edge over public sector. However, there was no major difference in the service quality. The most important service quality gap across sectors was improper maintenance of the medical facilities and equipment. The main shortcomings brought out by patients include untidy and uncomfortable hospital environment, absence of proper directional signs, inaccessible and unaffordable 24 hours services and no maintenance of privacy during treatment. The Patients also observed that staff was not courteous, there was no promptness in service and dignity of patients was not maintained. The study suggests authorities of both of public and private hospitals to take care of these aspects in order to improve patient satisfaction.

2.14 Kong, Camacho, Feldman, Anderson, & Balakrishnan, (2007) conducted a cross-sectional study with variables namely waiting time, time spent with doctors and friendliness on a convenience sample of 20,901 patients to determine patient satisfaction with physician. The study revealed that with equal waiting time spent by elderly and non-elderly patients, the physician satisfaction scores was higher with elderly patients. There was significant correlation

of patient satisfaction between increased time spent with physicians and non-elderly patients rather than elderly patients. Also, physician satisfaction in elderly and non-elderly groups was highly correlated with friendliness or empathy.

2.15 Shantala S. Bhole, Sagarika S. Bhole, Sadashiv D. Bhole & Jayshree J. Upadhye in August 2017 conducted a survey for 4 months on 100 indoor patients in a super specialty Uro-gynecology hospital in Nagpur. The study revealed that patient satisfaction was of very high order regarding basic amenities of hospital, provision for water and cleanliness levels. The patients were happy with the attitude and communication skills of doctors.

Research Methodology

3.1 Research design is a plan, structure and strategy of investigation conceived so as to obtain answer to research questions and to control variance. It provides an overview of the total layout including consideration of how the work has to be executed. It consists of the complete information about the research work. This chapter provides a description of the research design under various sub heads.

3.2 Type of Study

Exploratory study is being conducted to assess the factors responsible for In Patient and Out Patient Satisfaction /Dissatisfaction.

3.3 Study Population

3.3.1 Sampling Unit

The sampling unit for the study will be In Patients /Out Patients of Medicines, Gynecology, General Surgery, ENT and Orthopedics department of SMS Multispecialty Hospital.

3.3.2 Sampling Size

Approximately 150 patients from five departments of Medicines, Gynecology, General Surgery, ENT and Orthopedics department of SMS Multispecialty hospital. Equal numbers of IPD /OPD patients are being considered for the study.

3.3.3 Sampling Technique

Every day OPD attendance is being divided by number of interviews scheduled to arrive at interview interval. It is being ensured that interviews are conducted department wise and due care of non-response rate is taken. The IPD patients will be randomly selected in proportion to bed occupancy with only planned discharges and equally from above mentioned specialties.

3.3.4 Data Collection Technique

Questionnaire followed by interview.

3.3.5 Exclusion Criteria

IPD/OPD patients other than Medicines, Gynecology, General Surgery, ENT and Orthopedics department are not considered for the study and minimum 24 hours hospitalization is essential for IPD patients to be part of the study. Patients who are not in a position to understand and respond are not considered for the study.

3.3.6 Sources of Data

Both secondary data and primary data were used for this study.

3.3.7 Population of the Study

The defined targeted OPD and Inpatients population at SMS multispecialty hospital.

3.3.8 Tools for representing Data

Tables and graphs were used for presenting the data in a simplified manner

3.3.9 Period of Study

The study was conducted within a period of 3 months (01 february-30 April 2019).

Results on Patient Satisfaction (OPD/IPD)

This chapter presents a profile of the demographic and socio-economic characteristics of the study in the patient satisfaction. The information was collected from 150 patients from five departments of medicine, gynecology, general surgery, ENT and orthopedics department of SMS multispecialty hospital at Faridabad. Equal number of IPD and OPD patients was considered for the study. The information was collected on age, gender, educational status, type of work and household size. It is presumed that the information is representative of the patients reporting at SMS hospital for treatment.

4.1 Background Characteristics

4.1.1 Population sample

The population sample included 82 female respondents from OPD and IPD. The male respondents were 68 from OPD and IPD.

Table 4.1.1 Distribution of respondents by their gender

Description	OPD Patients	IPD Patients	Total
Female	40	42	82
Male	33	35	68
Total	73	77	150

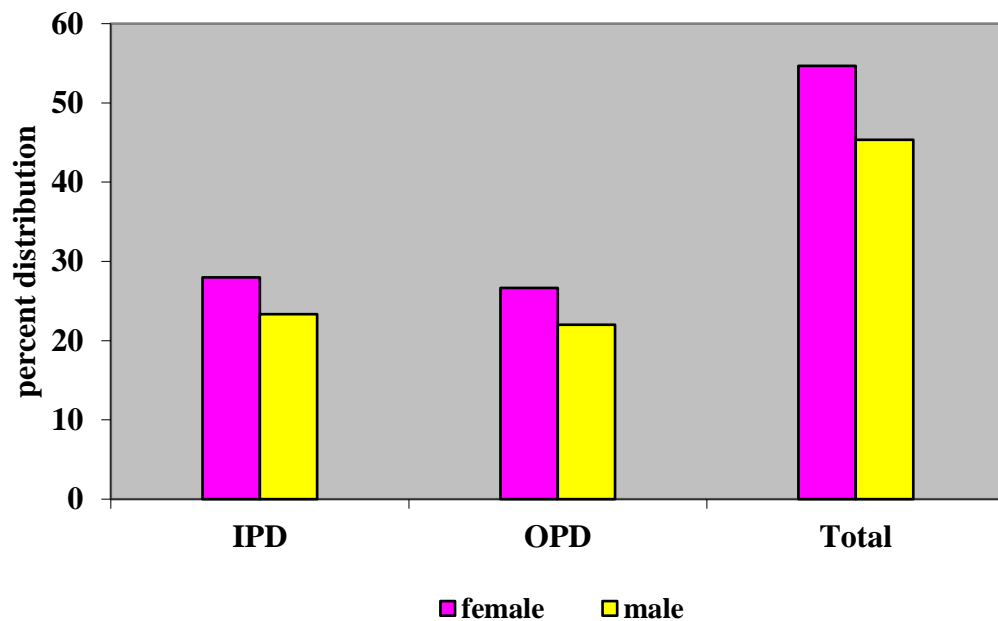


Figure 4.1.1 Respondents according to Genders

4.1.2 Gender-Age distribution

The age distribution of the respondents varies from one year onwards and goes beyond sixty years or more. The distribution of respondents according to age and gender is:

Table 4.1.2 Distribution of respondents by their age

Age	OPD		IPD	
	Female	Male	Female	Male
1-17	1	1	4	3
18-30	17	9	15	11
31-45	12	10	14	12
46-60	6	7	5	5
61 and above	4	6	4	4

	40	33	42	35
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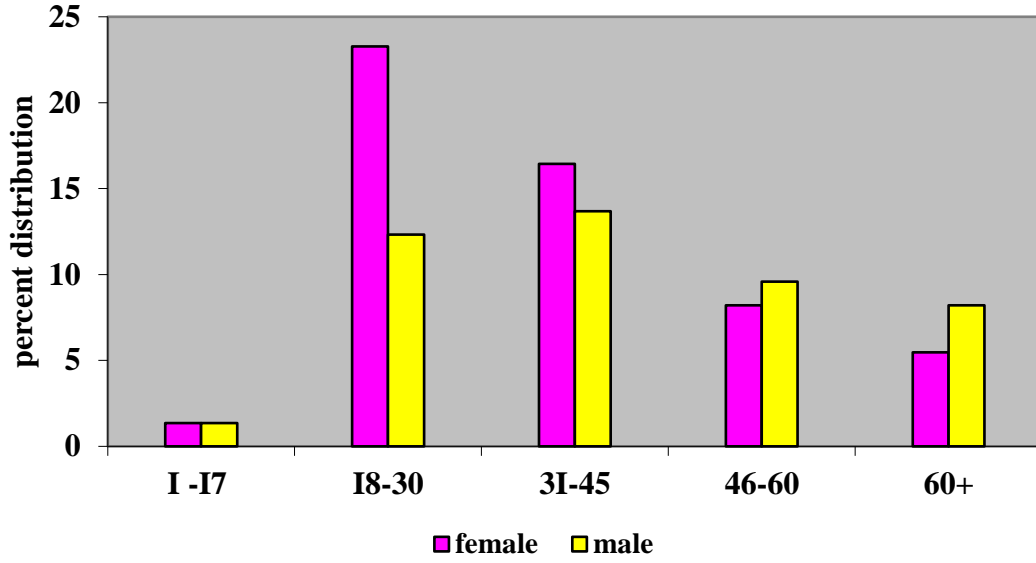


Figure 4.1.2 a. OPD Respondents according to Age

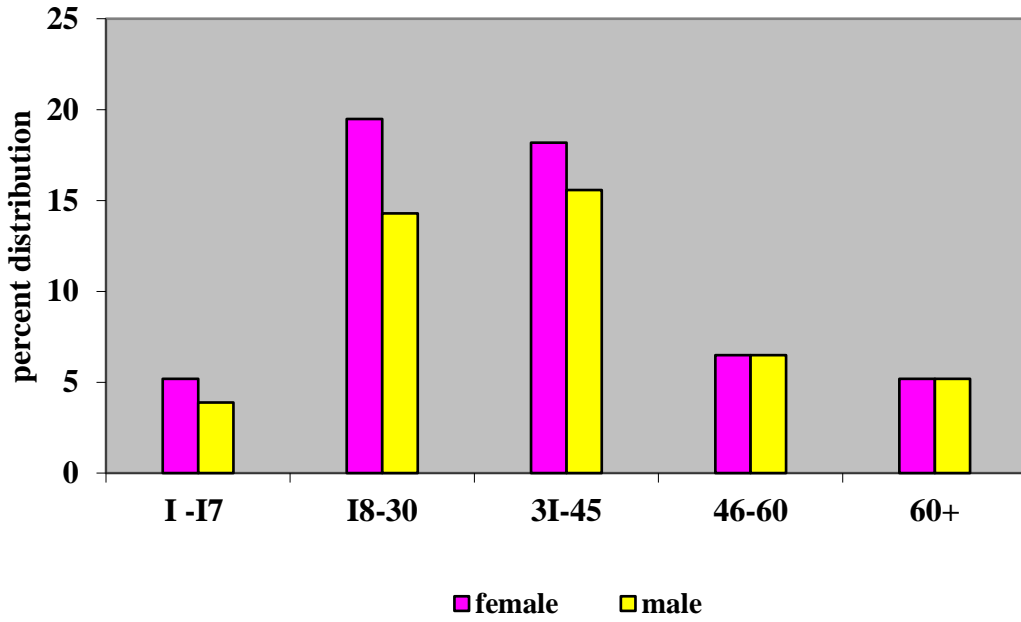


Figure 4.1.2 b. IPD Respondents according to Age

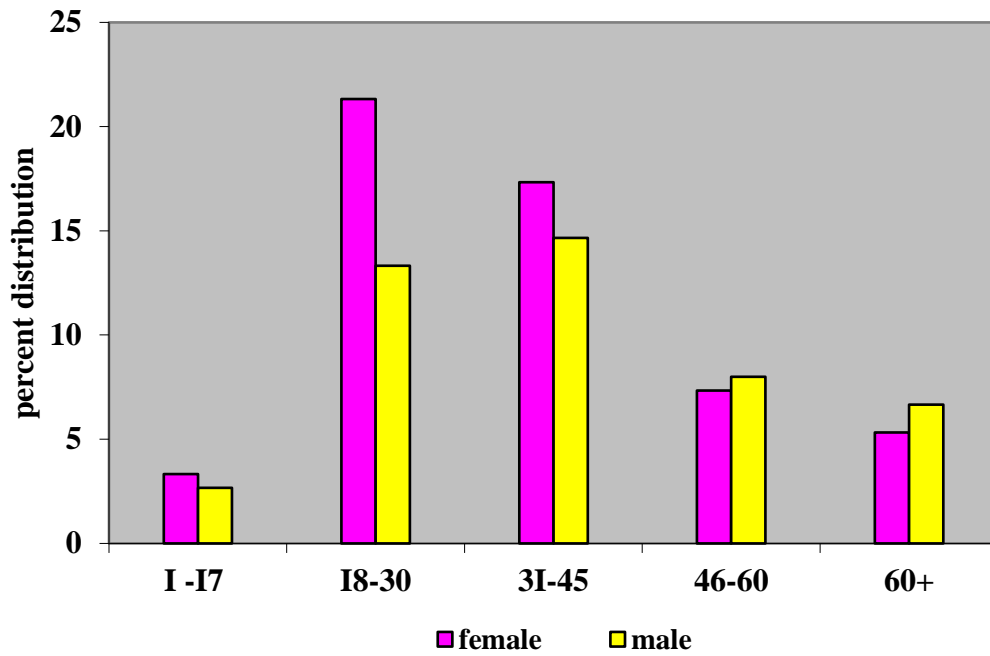


Figure 4.1.2 c. Female & Male Respondents according to Age

4.1.3 Educational Status

The educational level of respondent is an important characteristic because it depicts health seeking behavior. The table displays the extent of literacy and the level of educational attainment among the respondents.

Table 4.1.3 Distribution of respondents by level of education

	Illiterate	Primary	Secondary	Sr. Sec.	Grad.	P. G	Total
Female	3	9	23	13	28	6	82

Male	0	0	4	8	29	27	68
Total	3	9	27	21	57	33	150

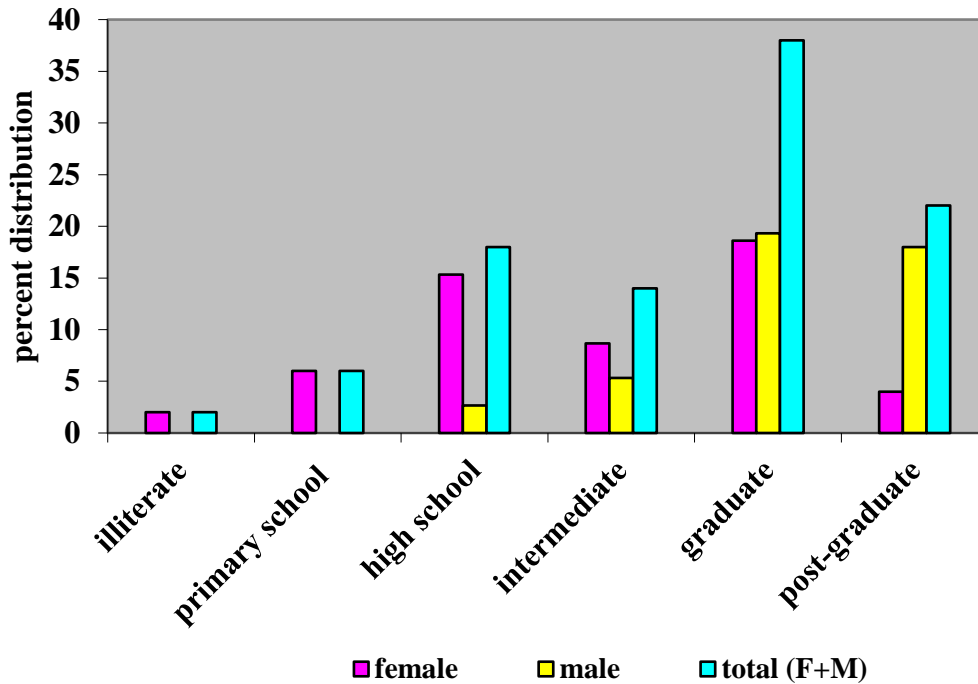


Figure 4.1.3 Respondents by level of Education

4.1.4 Occupation

The respondents who sought treatment were in agriculture, private jobs, self-employed, government jobs and professional fields in addition to all the male members, twenty two females were also contributing to family income by working in diverse arena. The distribution of respondents by their occupation is given below;

Table 4.1.4 Distribution of respondents by their job status

	Agriculture	Pvt.	Self emp.	Govt.	Pro.	Total

Female	8	7	2	1	4	22
Male	19	5	16	11	17	68
Total	27	12	18	12	21	90

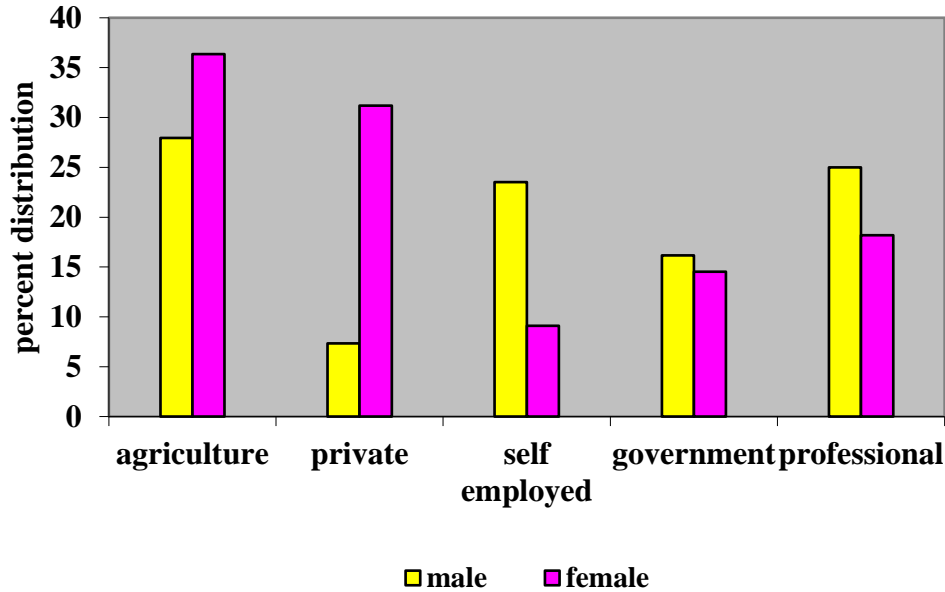


Figure 4.1.4 Respondents by Job Status

4.1.5 Size of household

The table 4.1.5 gives the respondents at SMS multispecialty hospital by their household size. It was found that twenty nine percent of the respondents have household size of four followed by thirty three percent having household size of five to six and above thirty eight percent having household size above six.

Table 4.1.5 Percent distribution of respondents by their household size

	4 and less	5-6 persons	Above 6
Percentage of household	29	33	38

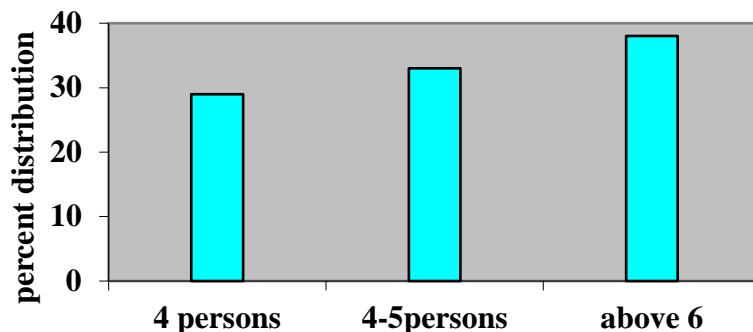


Figure 4.1.5 Respondents by their Household Size

4.1.6 Income

No respondent was in below poverty line. Generally, the income of male respondents was more than female respondents in the income category between 2.5 lacs – 5 lacs. There were equal percentage of male and female respondents earning more than 8 lacs whereas female respondents were far larger in number between forty-three thousand and 2.5 lacs.

Table 4.1.6 Distribution of respondents by their annual income

	Less than Rs. 42000	Rs. 42000- 2.5 lacs	2.5lacs- 5 lacs	5.1 lacs – 8 lacs	More than 8 lacs
Female	0	29	19	17	17
Male	0	10	23	21	14
Total	0	39	42	38	31

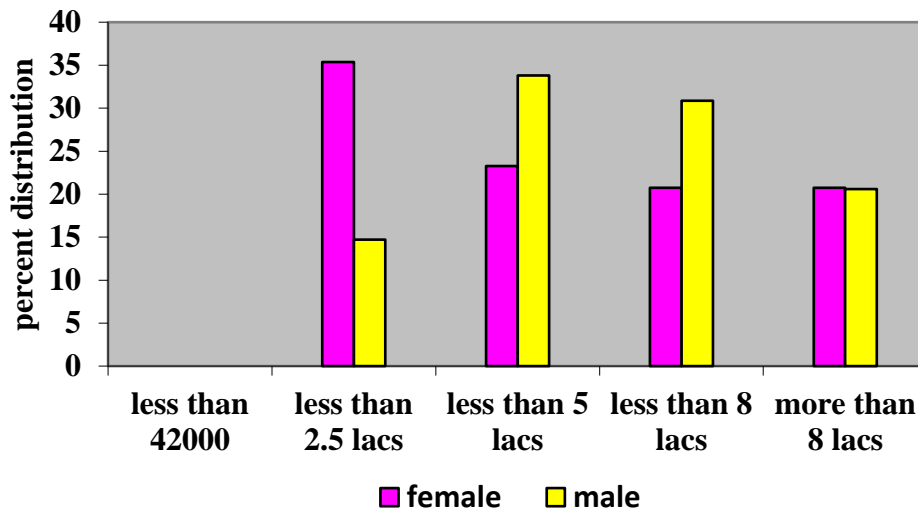


Figure 4.1.6 Respondents by their annual income

4.1.7 Household Wealth

A large number of respondents had family wealth more than 19 lacs followed by next category having wealth between 11.1 lacs – 19 lacs. Only one respondent had wealth less than 5 lacs and approximately 35 % respondents had wealth between 5 lacs – 11 lacs.

Table 4.1.7 Distribution of respondents by their household wealth

	Less than 5 lacs	Between 5-8 lacs	8.1 lacs – 11 lacs	11.1 lacs – 19 lacs	More than 19 lacs
Male	1	6	11	21	29
Female	0	13	23	19	27
Total	1	19	34	40	56

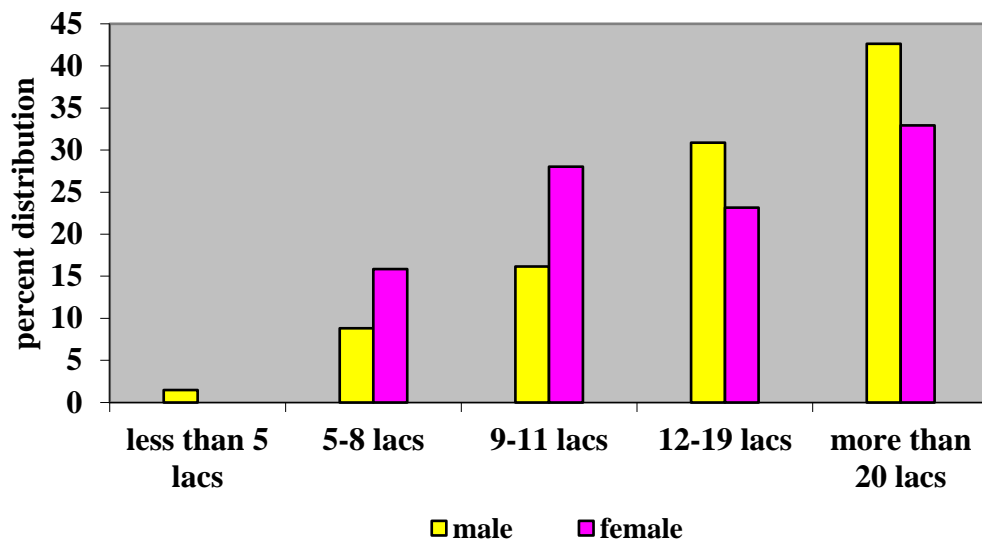


Figure 4.1.7 Respondents by their Wealth

4.2 Satisfaction level of patients

The present study included some questions designed to elicit information on the extent of patient satisfaction by various services from registration, consultation by doctor, assistance by nurse, input from dietary services, diagnostic services, emergency services, utilization of infrastructure facilities, use of medical stores and utility and support services. Such data can provide useful information regarding assessment of quality of care in SMS multispecialty hospital.

4.2.1 Satisfaction level regarding registration facilities

The registration facilities at the hospital are satisfactory. The respondents have graded registration facilities on the parameter of information on registration, waiting time in registration, formalities done in registration, availability of staff at registration and their behavior response was from 86 % - 94 %. The respondents have marginally graded facilities at IPD registration better than OPD.

Table 4.2.1a. Registration at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Information on Registration	7	56	4	5	1
Waiting time in Registration	8	57	3	5	0
Formalities in Registration	8	55	2	7	1
Behavior of the Receptionist	9	57	4	1	2
Staff available at registration	9	60	2	1	1

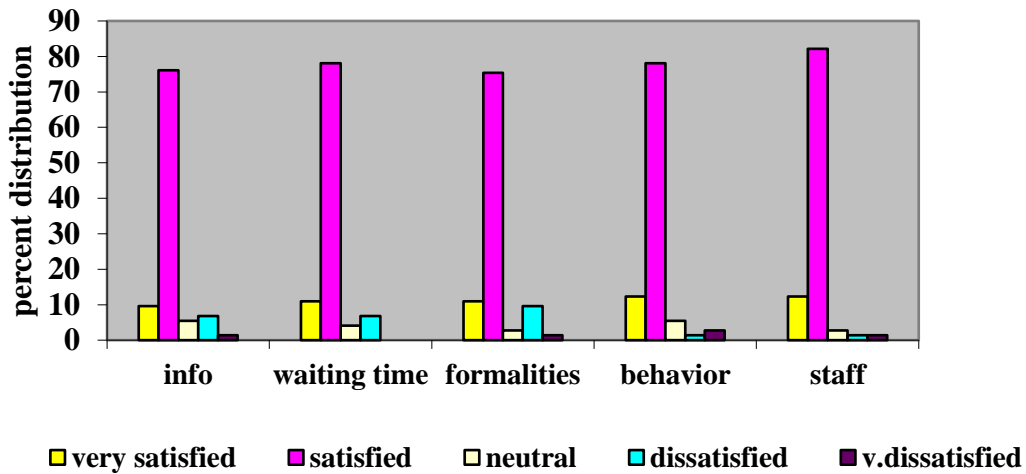


Figure 4.2.1 a. OPD registration

Table 4.2.1b. Registration at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied

Information on Registration	6	62	5	3	1
Waiting time in registration	7	63	3	2	2
Table 4.2.1b.continued					
Formalities in Registration	8	60	6	2	1
Behavior of the Receptionist	9	61	2	4	1
Staff available at registration	9	63	3	1	1

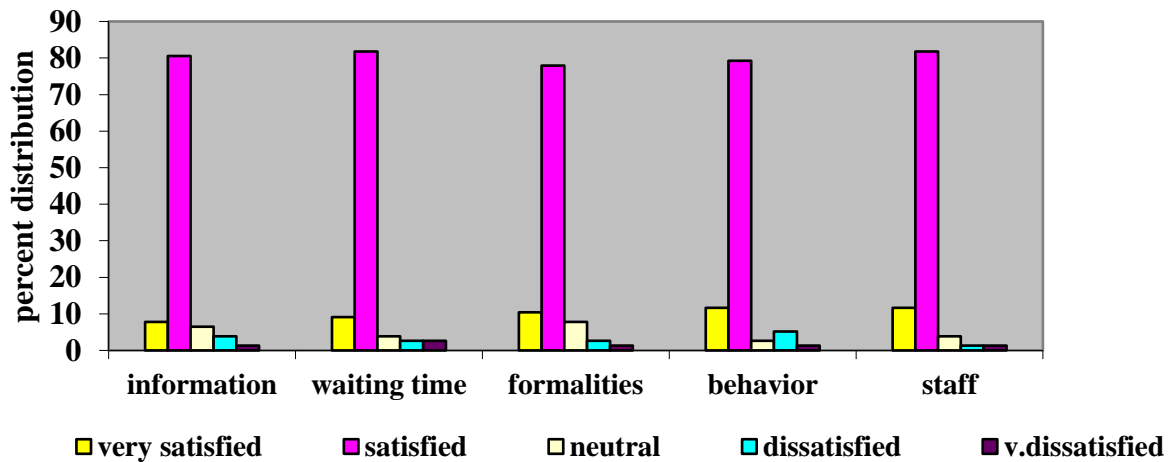


Figure 4.2.1 b. IPD registration

4.2.2 Satisfaction level regarding service providers

An overwhelming response was provided regarding service providers with respect to time spent in consultation, response to their queries, likely explanation for ailment, positive behavior from doctors, justifiable waiting time, exclusive examination room and appropriate prescription of medicines. The satisfaction level with respect to doctors were approximately 90 % at OPD and marginally higher in IPD.

Table 4.2.2 a. Distribution of respondents regarding service providers at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Table 4.2.2 a continued					
Time spent in consult	8	58	1	4	2
Response to queries	10	59	2	1	1
Explanation given for ailment	9	52	4	5	3
Behavior of the doctors	11	59	1	1	1
Skills	5	58	3	2	3
Waiting time for doctors	7	60	3	1	2
Exclusive exam Room	11	59	2	1	0
Medicines prescribed	10	60	2	1	0

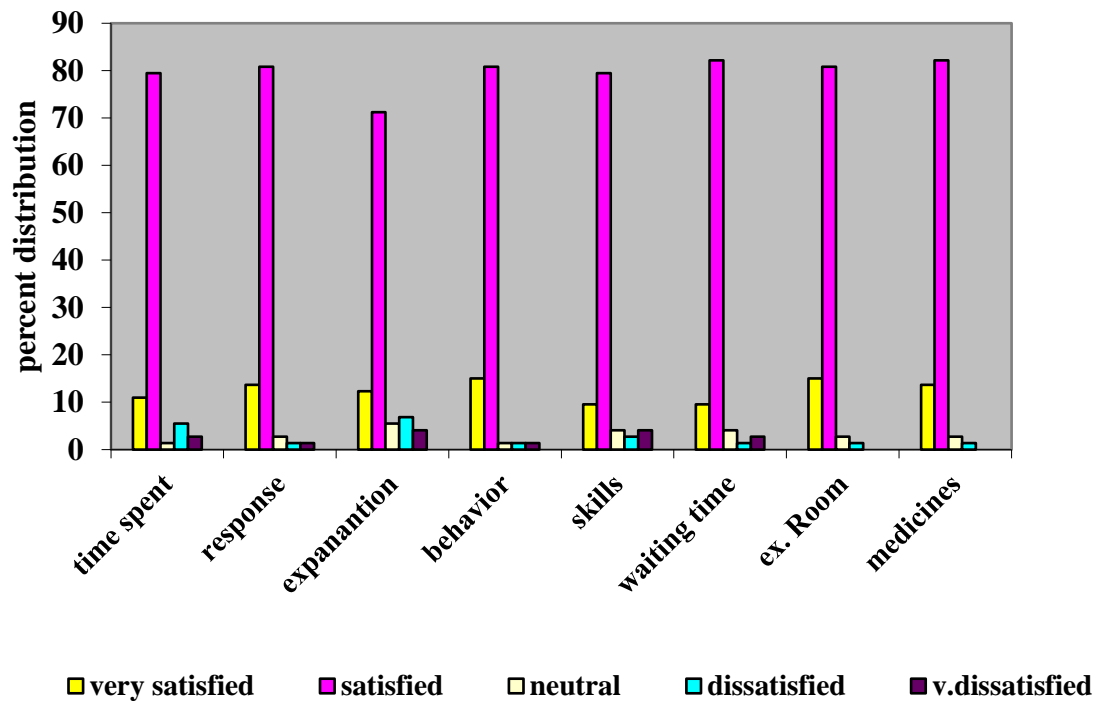


Figure 4.2.2 a. Satisfaction level regarding service provided by doctors at OPD

Table 4.2.2 b. Distribution of respondents regarding service providers at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Time for consultation	10	61	3	1	2
Response queries	12	61	0	3	1
Explanation for ailment	11	58	2	4	2
Behavior of the doctors	12	61	0	3	1
Skills	8	62	2	3	2
Waiting time for doctors	9	62	4	1	1

Exclusive exam Room	9	66	2	0	0
Medicines prescribed	9	65	3	0	0

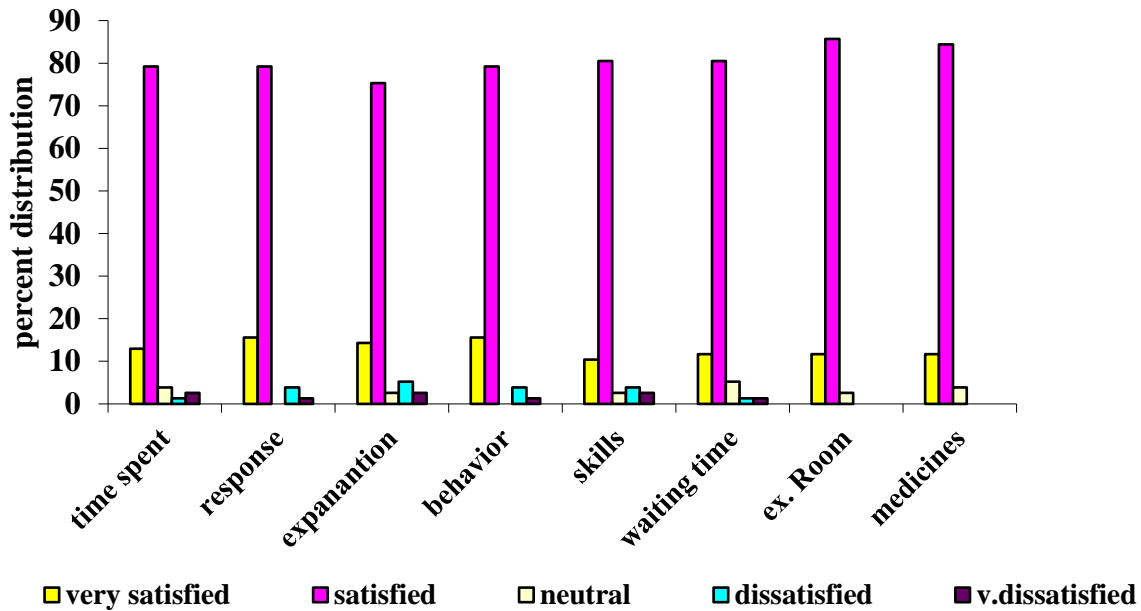


Figure 4.2.2 b. Satisfaction level regarding service provided by doctors at IPD

4.2.3 Satisfaction level regarding nursing service providers

The quality of cares and services offered by the nurses were further assessed by asking respondents regarding behavior of nurses, timely availability of nurses in OPD / IPD. The information was also obtained regarding medication given by staff nurses and perception of respondents regarding skill set of nurses.

Table 4.2.3 a. Distribution of respondents regarding nursing service providers at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied

Behavior of the nurses	6	57	5	3	2
Timely availability of nurses in OPD/wards	5	56	5	4	3
Medication by staff nurses	9	56	3	3	2
Skills	8	56	3	4	2

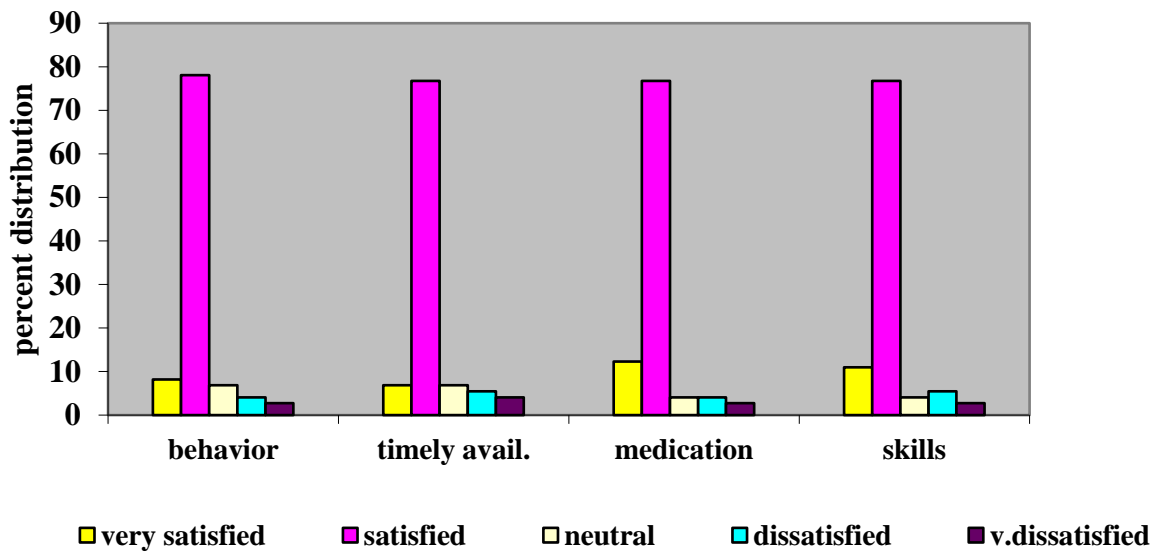


Figure 4.2.3 a. Satisfaction level regarding nursing service provided by doctors at OPD

Table 4.2.3 b. Distribution of respondents regarding nursing service providers at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Behavior of the nurses	7	59	3	4	4
Timely availability of nurses in OPD/wards	9	56	5	3	4

Medication by nurses	10	59	4	2	2
Skills	7	60	6	2	2

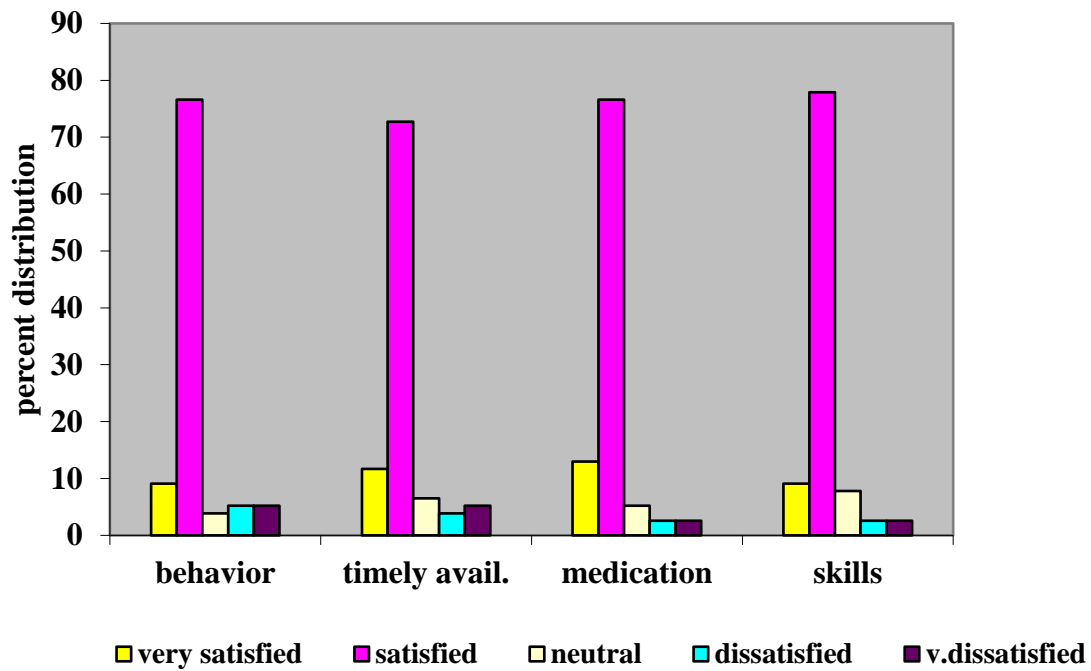


Figure 4.2.3 b. Satisfaction level regarding nursing service provided by doctors at IPD

4.2.4 Satisfaction level regarding dietary services

The respondents were generally pleased with the quality, quantity, taste, and cost, delivery time for food and provision for dietetic meal. The satisfaction levels for various aspects was generally 89% at OPD and marginally higher at IPD.

Table 4.2.4 a. Distribution of respondents regarding dietary services at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Cost of the food	6	56	6	3	2
Quality of the food	8	55	8	1	1
Quantity of the food	10	56	7	0	0
Taste	3	57	7	4	2
Delivery time	11	56	6	0	0
Prov. for dietetic food	12	49	10	1	1

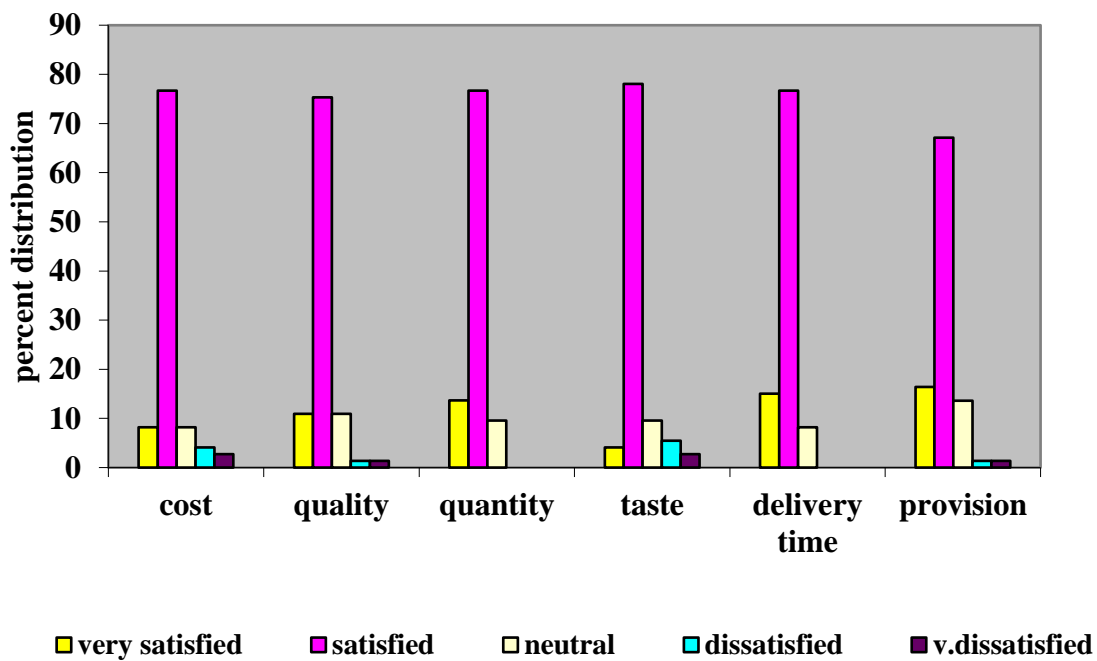


Figure 4.2.4 a. Satisfaction level regarding dietary services at OPD

Table 4.2.4 b. Distribution of respondents regarding dietary services at IPD

	Very	Satisfied	Neutral	Dissatisfied	Very

	satisfied				Dissatisfied
Cost of the food	6	59	7	3	2
Quality of the food	9	57	8	2	1
Quantity of the food	14	57	6	0	0
Taste	4	60	5	5	3
Delivery time	13	57	6	1	0
Prov. for dietetic food	14	51	10	1	1

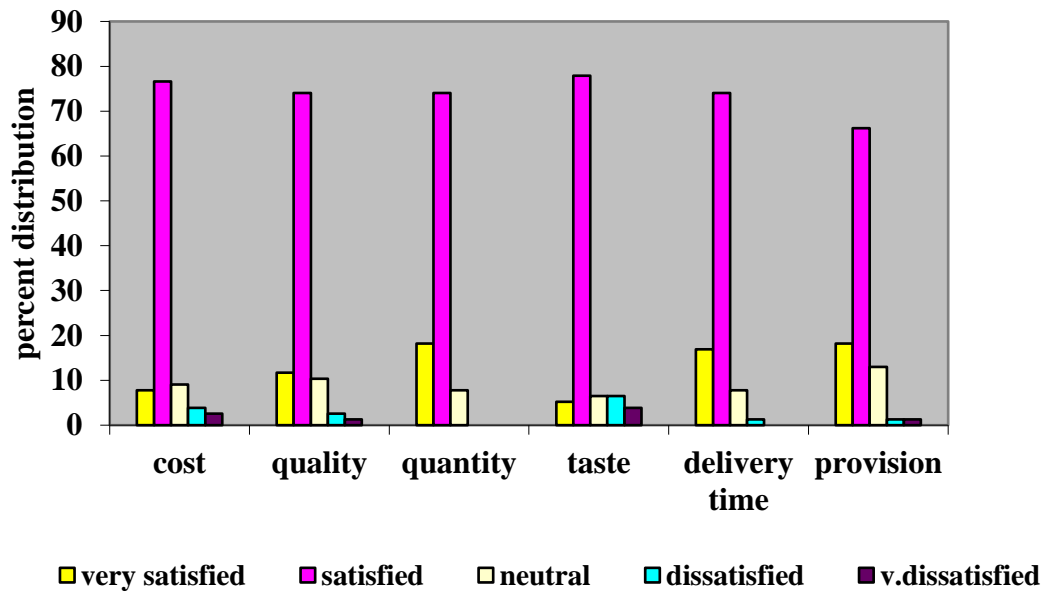


Figure 4.2.4 b. Satisfaction level regarding dietary services at IPD

4.2.5 Satisfaction level regarding diagnostic services

The respondents were pleased with the diagnostic services. The respondents appreciated the technology being used at affordable prices, good response by the staff, minimum waiting time for conduct of test and timely availability of report at the hospital.

Table 4.2.5 a. Distribution of respondents regarding diagnostic services at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Availability latest tech	6	57	7	3	0
Waiting time	10	56	1	4	2
Cost of Services	5	57	9	1	1
Time for report	7	60	1	2	3
Response by Staff	8	56	6	2	1

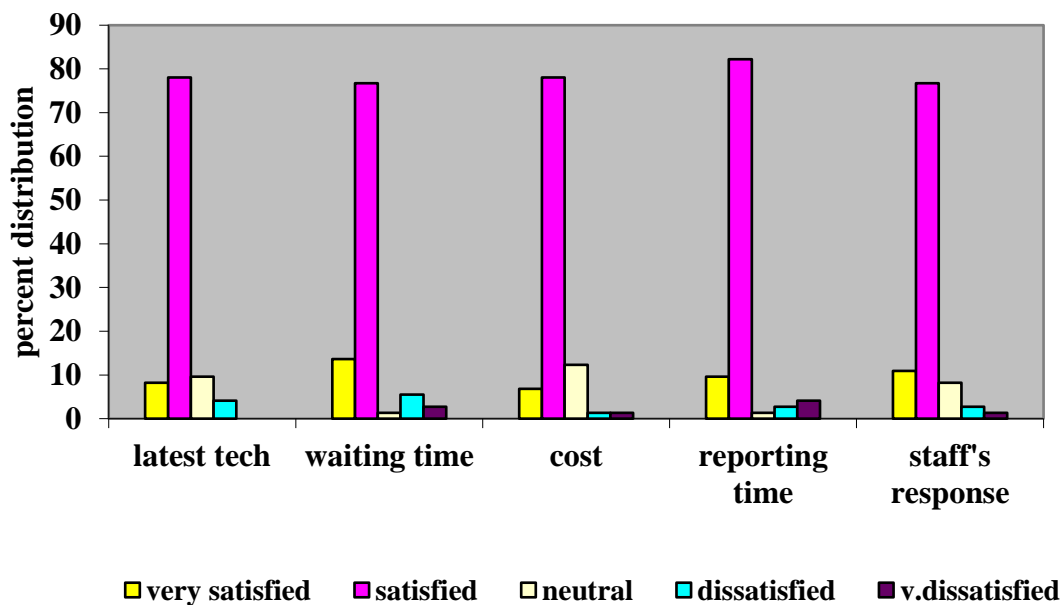


Figure 4.2.5 a. Satisfaction level regarding diagnostic services at OPD

Table 4.2.5 b. Distribution of respondents regarding diagnostic services at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Availability of latest technology	7	60	8	2	0
Waiting time	11	59	3	3	1
Cost of Services	5	61	8	2	1
Time for report	10	61	3	2	1
Response by Staff	9	59	4	3	2

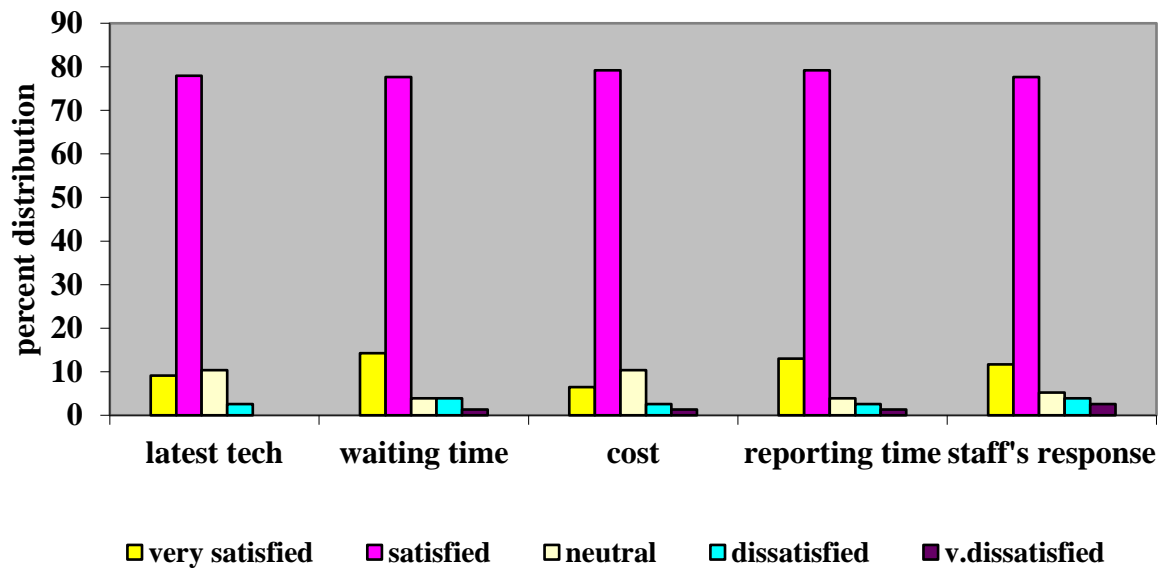


Figure 4.2.5 b. Satisfaction level regarding diagnostic services at IPD

4.2.6 Satisfaction level regarding emergency services

The respondents for emergency services at OPD and IPD were 4 and 11 respectively. In spite of small population sample the respondents were satisfied with response of doctor, speed of handling the case, time taken for registration, availability of specialist and explanation given by the doctors to the patients.

Table 4.2.6 a. Distribution of respondents regarding emergency services at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Response of doctor	1	3	0	0	0
Explanation about Patients	1	2	1	0	0
Speed of handling	1	1	2	0	0
Time for Registration	1	2	1	0	0
Availability of specialist	1	2	1	0	0

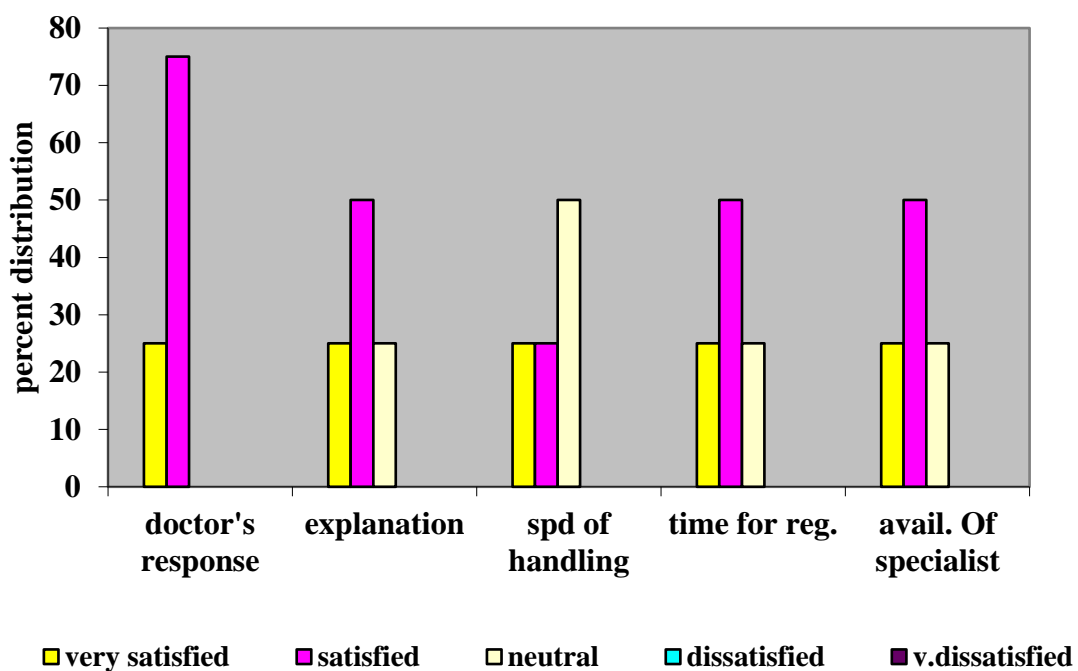


Figure 4.2.6 a. Satisfaction level regarding emergency services at OPD

Table 4.2.6 b. Distribution of respondents regarding emergency services at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Response of doctor	2	9	0	0	0
Explanation about Patients	3	7	1	0	0
Speed of handling	4	7	0	0	0
Time for Registration	2	6	3	1	0
Availability of specialist	2	7	1	1	0

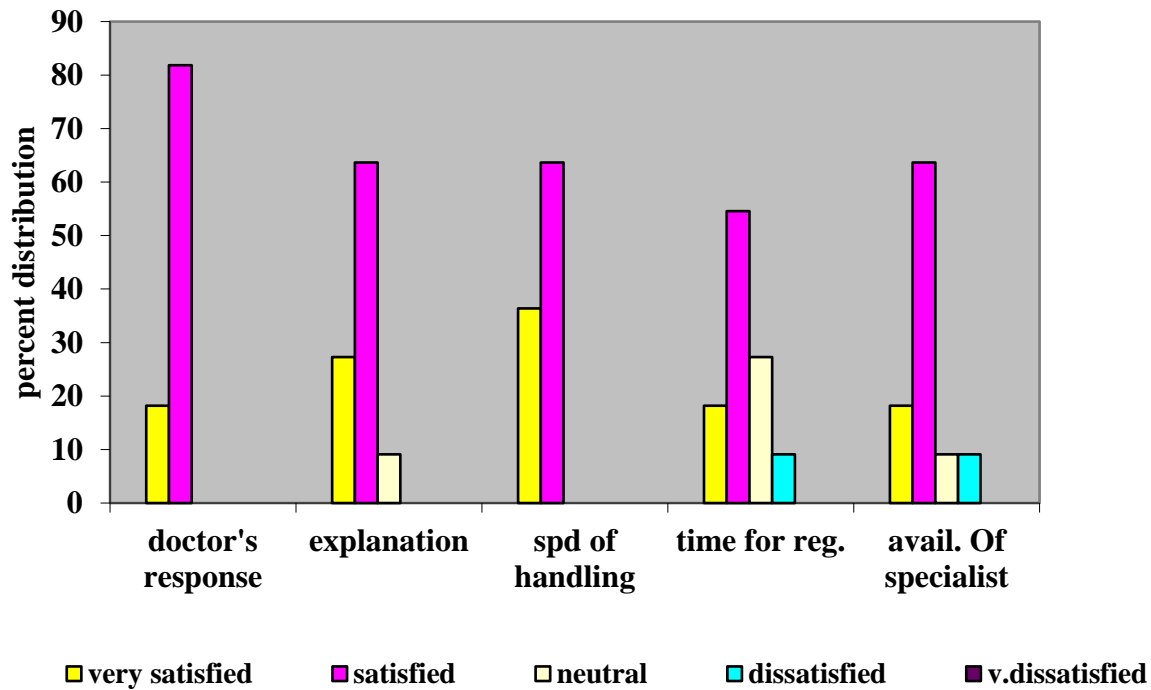


Figure 4.2.6 b. Satisfaction level regarding emergency services at IPD

4.2.7 Satisfaction level regarding infrastructure facilities

Majority of the respondents have expressed their satisfaction with regard to the physical facilities available at the waiting area. The respondents found the general cleanliness, sanitation, drinking water and trash disposal facilities, ventilation and lighting of a very high order. The respondents found it very convenient to approach the required counter

and doctor's room/ward with the help of direction boards. The satisfaction level regarding infrastructure facilities by OPD and IPD respondents were approximately 90%.

Table 4.2.7 a. Distribution of respondents regarding infrastructure facilities at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
General cleanliness (including rooms)	12	53	5	2	1
Sanitation of the hospital	10	54	6	2	1
Ventilation of the rooms	9	57	5	1	1
Drinking water facility	14	51	7	1	0
Trash disposal	11	56	4	1	1
Seating arrangement	9	54	9	1	0
Ease in reaching departments	8	56	5	3	1
Lighting arrangements	13	55	4	1	0

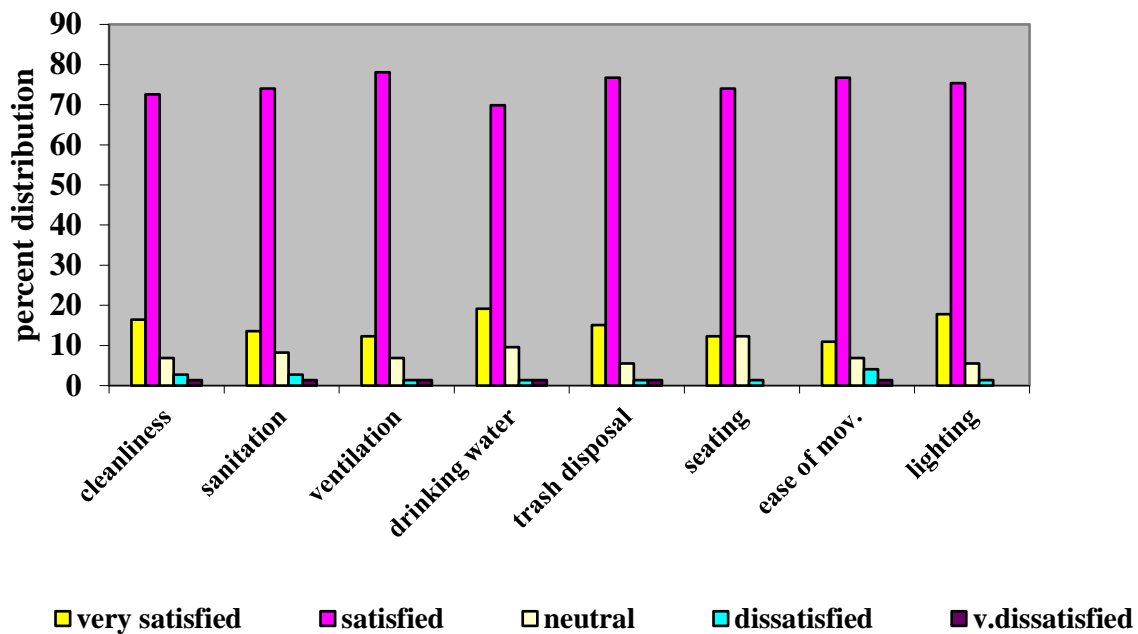


Figure 4.2.7. a. Satisfaction level regarding infrastructure facilities at OPD

Table 4.2.7 b. Distribution of respondents regarding infrastructure facilities at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
General cleanliness (including rooms)	14	55	4	2	2
Sanitation of the hospital	13	54	8	1	1
Ventilation of the rooms	10	60	5	1	1
Drinking water facility	12	56	8	1	0
Trash disposal	10	61	4	1	1
Seating arrangement	9	57	10	1	0

Ease in reaching					
departments	8	57	7	4	1
Lighting arrangements	14	57	5	1	0

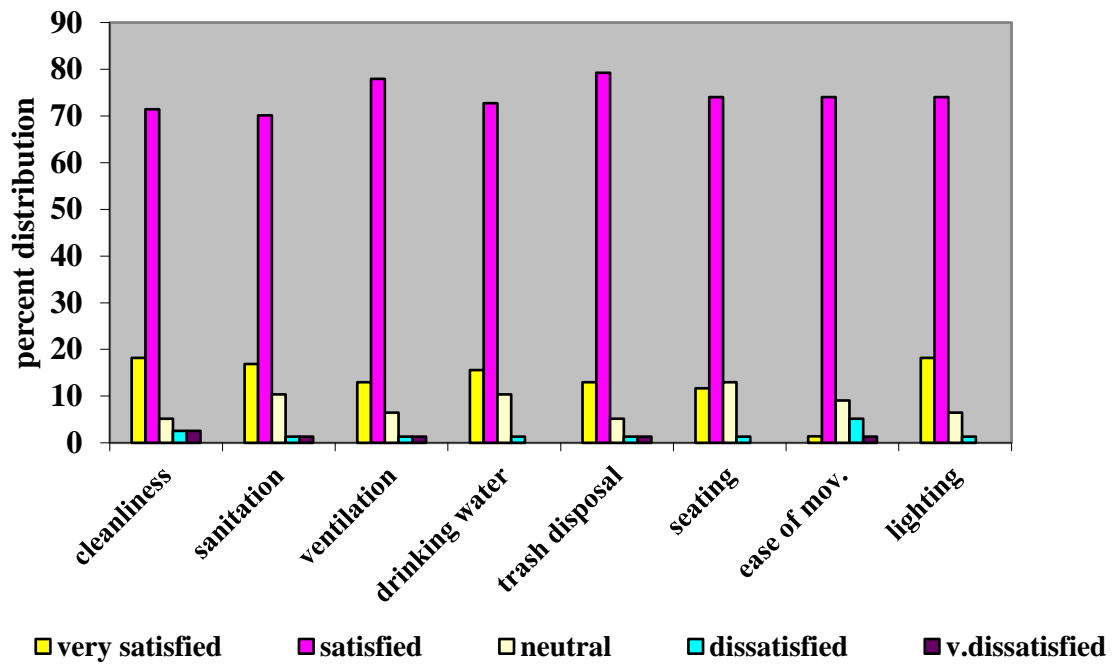


Figure 4.2.7 b. Satisfaction level regarding infrastructure facilities at IPD

4.2.8 Satisfaction level regarding medical store services

The quality of medical store services at the hospital was further assessed by asking respondents about the availability of medicines and their cost. Also the respondents were asked their views about the staff availability and service promptness at the medical store and overwhelming respondents graded the services satisfactory with approximate percentage of 90% at OPD and IPD.

Table 4.2.8 a. Distribution of respondents regarding medical store services at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Availability of medicine	12	55	3	2	1
Availability of staff	9	57	3	3	1
Promptness in service	7	58	5	2	1
Cost of medicine	6	58	7	1	1

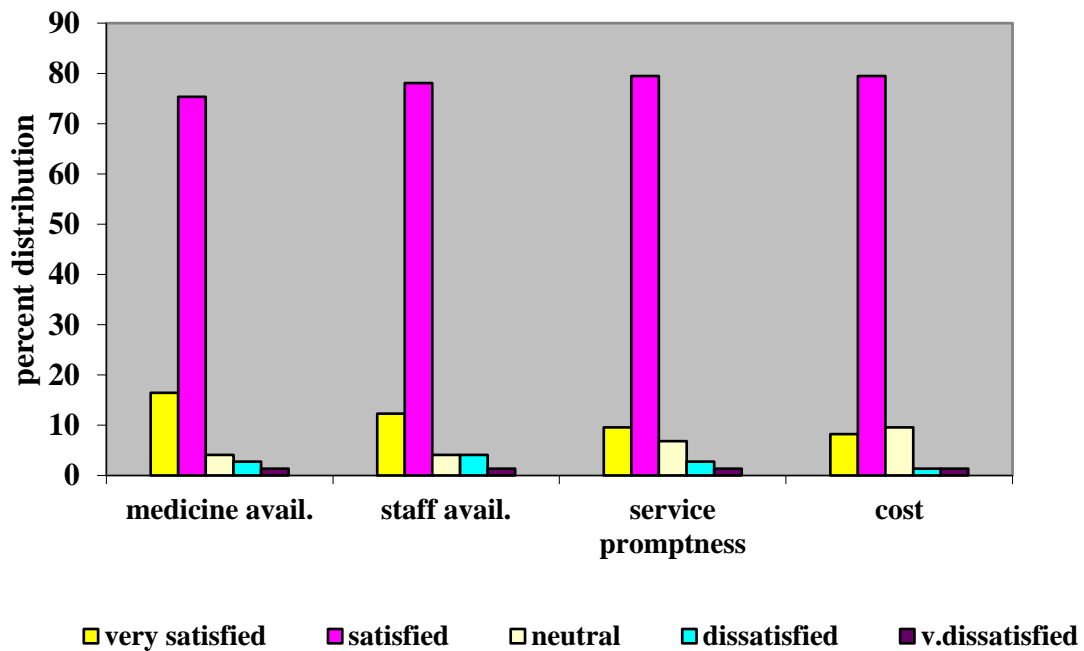


Figure 4.2.8 a. Satisfaction level regarding medical store services at OPD

Table 4.2.8 b. Distribution of respondents regarding medical store services at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Availability of medicine	13	58	3	2	1
Availability of staff	9	61	5	1	1
Promptness in service	8	60	7	1	1
Cost of medicine	6	62	6	2	1

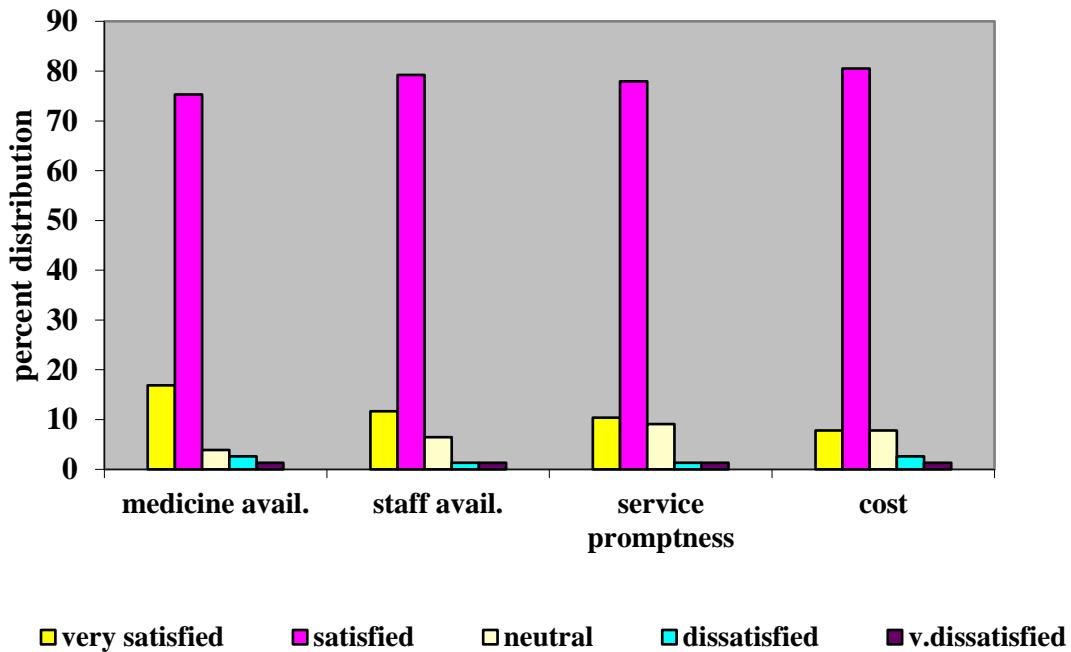


Figure 4.2.8 b. Satisfaction level regarding medical store services at IPD

4.2.9 Satisfaction level regarding utility and support services

Canteen, blood bank, ambulance and billing services were assessed by the respondents at OPD and IPD in addition views of respondents were sought on vehicle parking and security aspects.

Overall the respondents were satisfied with the utility and support services.

Table 4.2.9 a. Distribution of respondents regarding utility and support services at OPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Canteen	10	57	4	2	0
Blood bank	8	55	9	1	0
Ambulance	15	54	3	1	0
Billing services	9	58	4	1	1
Vehicle parking	7	52	8	3	3
Provision of security	11	53	6	2	1

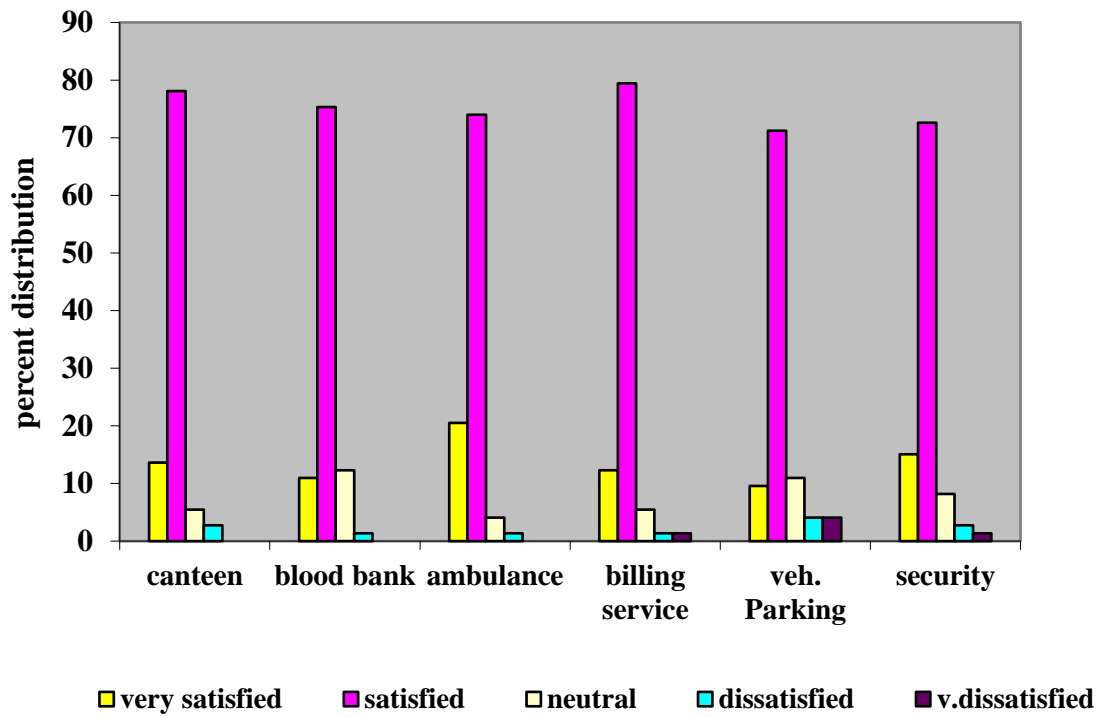


Figure 4.2.9 a. Satisfaction level regarding utility and support services at OPD

Table 4.2.9 b. Distribution of respondents for utility and support services at IPD

	Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
Canteen	12	59	3	2	1
Blood bank	10	57	9	1	0
Ambulance	14	59	3	1	0
Billing services	8	62	4	2	1
Vehicle parking	6	56	7	4	4
Provision of security	15	51	8	2	1

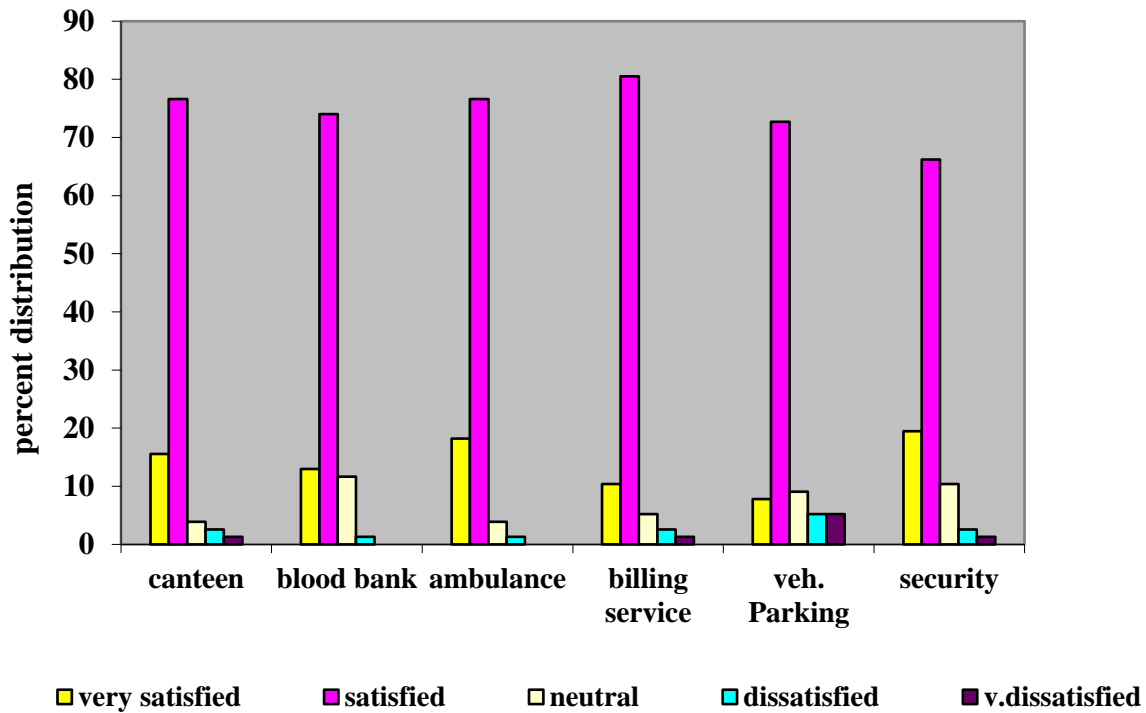


Figure 4.2.9 b. Satisfaction level regarding utility and support services at IPD

4.2.10 Overall Satisfaction level regarding age, education and income respectively

Overall Satisfaction regarding age

The overall patient satisfaction regarding age is approximately 90% however the satisfaction level among elderly is marginally higher say 94%.

Table 4.2.10a. Distribution of respondents regarding Age

	1-17 yrs.	18-30 yrs.	35-45 yrs.	46-60 yrs.	Above 60 yrs.	Total

Satisfied	8	46	42	20	17	133
Neutral	1	3	3	2	1	10
Dissatisfied	0	3	3	1	0	7
Total	9	52	48	23	18	150

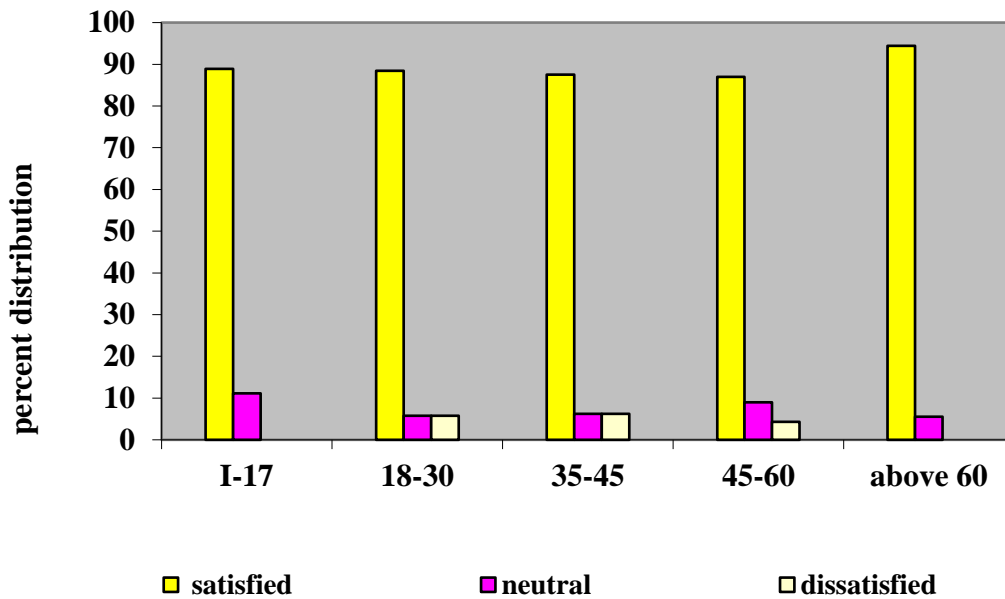


Figure 4.2.10a. Overall Satisfaction level regarding age

Overall satisfaction regarding education

The satisfaction level among respondents regarding education is consistently approximately 89% however with post graduate respondents satisfaction is marginally higher approximately 90.9%. The respondents with educational qualification intermediate have 85.18% satisfaction level.

Table 4.2.10b. Distribution of respondents regarding Education

	Illiterate	Primary	Sec.	Sr. Sec.	Grad.	P.G.	Total
Satisfied	3	8	23	18	51	30	133
Neutral	0	1	3	2	3	1	10
Dissatisfied	0	0	1	1	3	2	7
Total	3	9	27	21	57	33	150

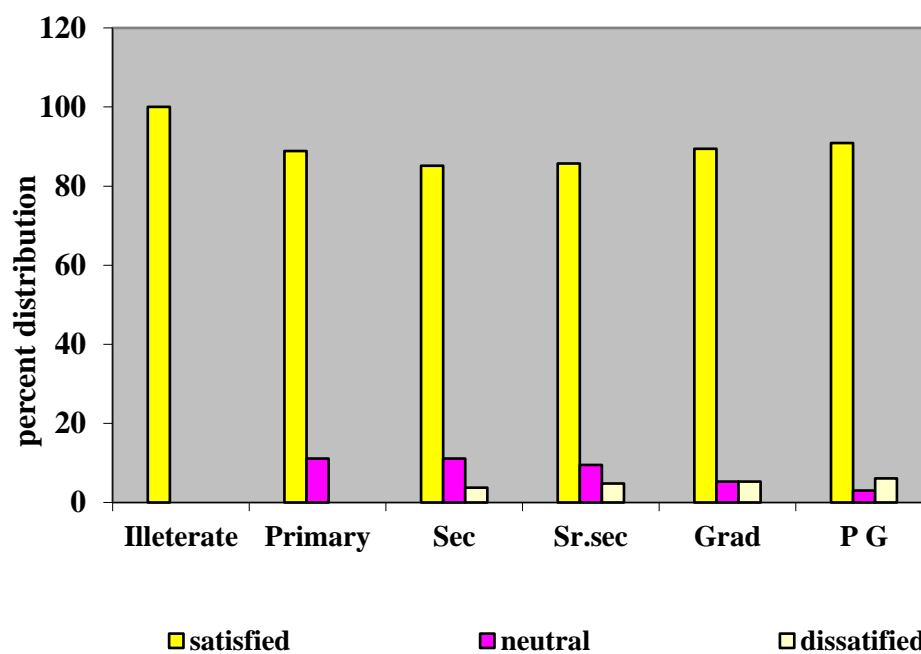


Figure 4.2.10b. Overall Satisfaction level regarding education

Overall satisfaction regarding income

The satisfaction level marginally increases among the respondents as their annual income enhances. Respondents had satisfaction level approximately 89%.

Table 4.2.10c. Distribution of respondents regarding Income

	42000- 2.5 lacs	2.51 – 55.1- lacs	55.1- lacs	8 More than 8 lacs	Total
Satisfied	34	37	34	28	133
Neutral	4	3	2	1	10
Dissatisfied	1	2	2	2	7
Total	39	42	38	31	150

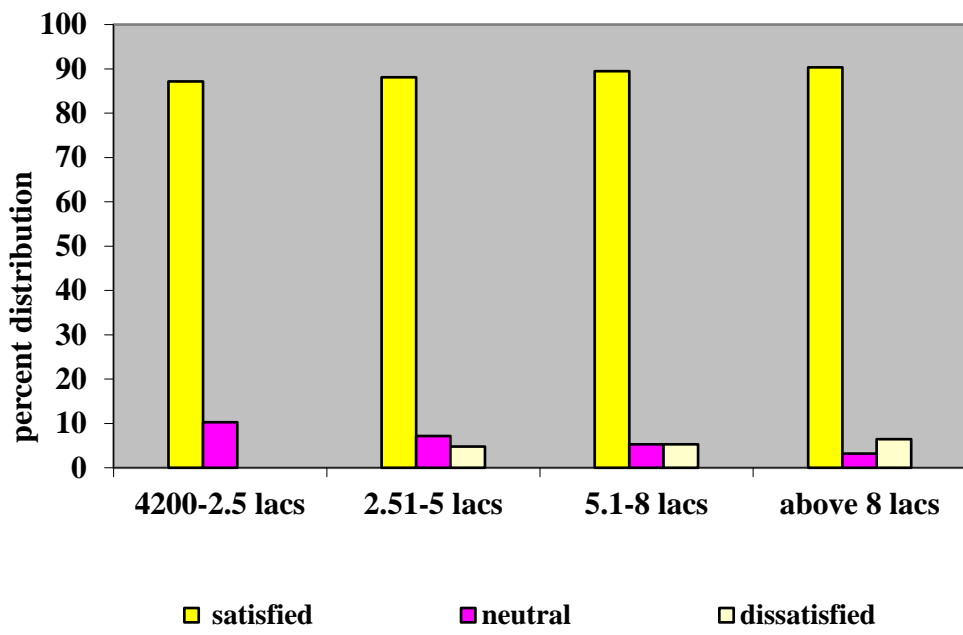


Figure 4.2.10c. Overall Satisfaction level regarding income

Discussion

The patients at SMS Multispecialty hospital are satisfied with the quality of service in the hospital. The patient satisfaction regarding Quality of Service includes registration facilities, time provided by the service providers i.e. doctors and nurses, diagnostic services, physical

facilities, emergency services and certain utility services. The maximum respondents were in the age bracket of 18-30 years and 31-45 years comprising young and middle age adult's patient's percentage as 34.66% and 32% respectively. It implies that mature and financially independent patients avail services only when they feel satisfied with the quality of service. Also, all respondents with less than 18 years and more than 60 years were fully satisfied with quality of service implying young children and elderly do not relate satisfaction to quality of service. The respondents between 18 years and 60 years considered quality of service an important aspect towards satisfaction.

The majority of the respondents belong to the category of lower middle class with 46% having annual income of more than 5 lacs and no respondent had annual income less than Rs 42000. All the respondents with annual income less than 2.5 lacs were fully satisfied with quality of service and respondents in higher income range had higher expectations. There was marginal difference in satisfaction level with rising income. This implies that rising income level is associated with patient expectations.

The percentage of Graduate and Post Graduate respondents was 60%. All respondents with educational qualification primary or less were fully satisfied. The satisfaction level in respondents with educational qualification senior secondary or above was approximately 89 %. The patient satisfaction was marginally higher with enhancement in educational qualification of respondents. This implies that educated respondents have better understanding about work culture and thus more satisfied.

Overall approximately 6% of respondents were highly satisfied and 2% were highly dissatisfied with the quality of services. A very small percentage of respondents were dissatisfied with information provided at the Registration Desk, time spent in consultation/explanation given

by doctors and skills/ timely availability of nurses. Some respondents felt that cost of food and waiting time during diagnostic test should reduce. The respondents expressed views regarding improvement in parking facilities.

6 Comparisons with Previous Studies

The above-mentioned findings seek support in various studies wherein factors like promptness, medical aid and patient interest for service quality and amenities were the main determinant of patient satisfaction with service quality. However, Papanikalam and Natni (2008) assessed that patient's bad experience with aspects of care was not directly reflected in low level of satisfaction. It was also concluded that it is generally bad treatment or wrong diagnosis which results in low patient satisfaction.

7 Recommendations

Although all patients were satisfied with service quality at the hospital however following measures could be implemented to improve patient satisfaction: -

- Reduction in timings at Registration Counter and provision of entire information by the Desk Receptionist.
- Doctors to spend more time with the patient and must provide explanation to all queries of the patients.
- The nurses should endeavor enhanced time availability while dealing with patients.
- The service providers (doctors and nurses) and other support staff to possess good soft skills and behavior while dealing with patients.
- The service at billing counter to be further expedited.

8 Conclusion

The customer perception about service provider is formed based on delivery of quality of service. Therefore, any service organization keen to become successful must understand the end user perception of quality of service in the hospitals. This will immensely benefit patients as well as service provider and the community at large. The information generated in these studies would benefit SMS Multispecialty Hospital to understand the distinctions of service quality and the level of patient satisfaction. The study gives an insight in the area in which hospital should strive to achieve excellence in patient satisfaction.

9 Scope for further research

- In addition to patient satisfaction, the patient's expectation might be studied.
- The study on development of methods of enhancing patient satisfaction might be undertaken.
- Comparison between patient satisfaction regarding quality of service between Private hospitals and Public Hospitals could be undertaken.

10 Limitations of the Study

Every social science research has some limitations and this study is not an exemption. The following limitations exist while conducting the study.

- The study covers only one Private Hospital and the result of the study can't be generalized with Clinics, General or other Super Specialty Hospitals.
- Accuracy of the data depends on the responses of the patients.

Questionnaire on Patient Satisfaction

Socio-Economic background of the patient

a)	Patient's name	
b)	Name of the Disease	
c)	Gender and Age	Male/Female _____(yrs.)
d)	Yearly Income of the family	Below Rs 42,000 / below 2.5 lacs / below 5 lacs/ below 8 lacs / above 8 lacs
e)	Educational Qualification	Illiterate/Primary school and below/high school/intermediate/graduate/post graduate and above
f)	Residential area	Rural/semi-urban/urban
g)	Occupation	Private/govt/business/professional/agriculture
h)	Size of the family	less than 4/4-6/above 6
i)	Total wealth of respondent	below 5 lac/5-8 lacs/8-11lacs/12-19 lacs/above 20 lacs

Satisfaction Level. Rate the following Patient Care Facilities Questionnaire based on your experience at OPD/IPD at SMS Multispecialty Hospital Faridabad.

Registration

		Very	Satisfied	Neutral	Dissatisfied	Very
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		satisfied				Dissatisfied
a)	Information on Registration					
b)	Waiting time in Registration					
c)	Formalities in Registration					
d)	Behavior of the Receptionist					
e)	Staff available at registration					

Consultation:

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
a)	Time spent in Consultation					
b)	Response to queries					
c)	Explanation given for ailment					
d)	Behavior of the doctors					
e)	Skills					
f)	Waiting time for doctors					
g)	Exclusive examination					

	Room					
h)	Medicines prescribed					

Nursing:

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
a)	Behavior of the nurses					
b)	Timely availability of nurses in OPD/wards					
c)	Medication given by the staff nurses					
d)	Skills					

Dietary Services:

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
a)	Cost of the food					
b)	Quality of the food					
c)	Quantity of the food					
d)	Taste					

e)	Delivery time					
f)	Provision for dietetic food					
g)	Any other specify					

Diagnostic Services (X-ray, Scanning, ECG etc.)

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
a)	Availability of latest technology					
b)	Waiting time					
c)	Cost of Services					
d)	Time for report					
e)	Response by Staff					
f)	Any other specify					

Emergency Services: -

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
a)	Response of the doctor					
b)	Explanation about Patients					
c)	Speed of handling					

d)	Time for Registration					
e)	Availability of specialist					
f)	Any other specify					

Infrastructure facilities: -

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
a)	General cleanliness (incl. rooms)					
b)	Sanitation of the hospital					
c)	Ventilation of the rooms					
d)	Drinking water facility					
e)	Trash disposal					
f)	Seating arrangement					
g)	Ease in reaching departments					
h)	Lighting arrangements					

Medical store services: -

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied

a)	Availability of medicine					
b)	Availability of staff					
c)	Promptness in service					
d)	Cost of medicine					

Utility & support services: -

		Very satisfied	Satisfied	Neutral	Dissatisfied	Very Dissatisfied
a)	Canteen					
b)	Blood bank					
c)	Ambulance					
d)	Billing services					
e)	Vehicle parking					
f)	Provision of security					

Did you experience any problems regarding new techniques, delay/wrong diagnosis, payment of service charges, maintenance of transparency, any ethical issues or communication from hospital post treatment?

BIBLIOGRAPHY

Journal Articles

1. Luecke RW, Rosselli VR, Moss JM (1991)The economic ramifications of “client” dissatisfaction. *Group Pract J.* 1991:8-18.
2. Brown SW, Nelson AM, Bronkesh SJ, Wood SD (1993)Quality service for practice success. Maryland: Aspen Publication; Patient Satisfaction Pays.
3. Berg JS, Dischler J, Wagner DJ, Rias JJ, Palmer-Shevlin N. (1993)Medication compliance: A healthcare problem. *Ann Pharmacother.* Pub Med 27: S1-24.
4. Andaleeb, S. (1998). Determinants of Customer Satisfaction with Hospital: A Managerial model. *Leadership in Health Service, 11(6-7),181-7.*
5. McKinnon, K., Crofts, P.D., Edwards, R., Campion,P.D.,&Edwards,R. H. (1998). The outpatient experience: Results of a patient feedback survey. *International Journal of Health Care Quality Assurance, 11(5).*
6. Bernhart, M., Wiadnyana, I., Wihardjo, H., &Pohan, I. (1999). Patient satisfaction in developing countries. *Social Science Medicine, 48(8), 989- 996.*
7. Sharma, & Chahal, H. (1999). A study on patient satisfaction in outdoor services of

- private health care facilities. *Vikalpa – The Journal of Decision Makers; Indian Institute of Management, 24(4),69-76.*
8. Picardsi A, Abeni D, Melchi CF, Puddu P, Pasquini P. Psychiatric morbidity in dermatological outpatients: An issue to berecognised. *Br J Dermatol.Pub Med2000;14:920-1.*
 9. Krueger G, Koo J, Lebwohl M, Menter A, Stern RS, Rolstad T. The impact of psoriasis on quality of life: Results of a 1998 National Psoriasis Foundaton patient-membership survey. *Arch Dermatol. Pub Med 2001; 137:280-4.*
 10. Renzi C, Abeni D, Picardi A, Agostini E, Melchi CF, Pasquini P, et al. Factors associated with patient satisfaction with careamong dermatological outpatients. *Br J Dermatol. Pub Med 2001; 145:617-23.*
 11. Bhattacharya, A., Menon, P., Koushal, V., & Rao, K. (2003). Study of patient satisfaction in a tertiary referral hospital. *Journal of the Academy of Hospital Administration,15(1).*
 12. Kong, M. C., Camacho, F. T., Feldman, S. R., Anderson, R. T., & Balakrishnan, R. (2007). Correlates of patient satisfaction with physician visit: Differences between elderly and non- elderly survey respondents. *Health and Quality of Life*

Outcomes,5(62).

13. Poulas GA, Brodell RT, Mostow EN. Improving quality and patient satisfaction in dermatology office practice. *Arch Dermatol. Pub Med* 2008; 144:263-5.
14. Papanikolaou, V., & Ntani, S. (2008). Addressing the paradoxes of satisfaction with hospital care. *International Journal of Health Care Quality Assurance*, 21(6).
15. Pawan Kumar Sharma, Shaik Iftikhar Ahmed, Manisha Bhatia Research (2008) Article Health care services in Punjab: Findings of a patient satisfaction survey, <https://doi.org/10.1177/004908570803800304>
16. Sengupta, A., & Mondal, S. (2009). Efficiency and financing in catering primary care to the poor's, A study of rural health services in India. *Journal of Health Management*, 11(3),501-526.
17. Abd manf, N., & Nooi, P. (2009). Patient satisfaction as an indicator of service quality in Malaysian Public Hospitals. *Asian Journal on Quality*, 10(1).
18. Kulkarni MV, Dasgupta S, Deoke AR, Nayse N. Study of satisfaction of patients admitted in tertiary care hospital in Nagpur. *National J Community Med.* 2011;2(1):37-9.
19. Baba I. Experiences in quality assurance at Bawku Hospital Eye Department.

- Ghana Community Eye Health. 2004;17(50):31-8. Lim PC, Tang NK. A study of patients' expectations and satisfaction in Singapore hospitals. *Int J Health Care Qual Assurance Leaders Health Serv.* 2000;13(6-7): 290.
20. Sharma RK. Patient satisfaction: a case study of zonal hospital, Mandi (HP). *Nursing Midwifery Res J.* 2005;1(3):151-8.
21. Mehta, S. (2011). Service quality as predictor of patient satisfaction: A study of the health care sector. *Journal of Health Management, 13(2),211-229.*
22. Alhashem, A., Alquraini, H., & Chowdhury, R. I. (2011). Factors Influencing patient satisfaction in primary healthcare clinics in Kuwait. *International Journal of Health Care Quality Assurance,24(3).*
23. Qadir SS, Pathak R, Singh M, Ahluwalia SK, Saini S, Garg PK. An assessment of patient's satisfaction with services obtained from a tertiary care hospital in rural Haryana. *Int J Collaborative Res on Internal Med Pub Health.* 2012;4(8):1524-37.
24. Mahapatra, S. (2013). A comparative study of service quality between private and public hospitals: Empirical evidences from India. *Journal of Medical Marketing: Device, diagnostic and pharmaceutical marketing, 13(2),115-127.*
25. Ekpe EE, Peter AI, Surgical patient's satisfaction with services at a tertiary hospital in

south state of Nigeria. J Med Res Res. 2016;2(5):157-62. 7.

26. BholeShantal S, Bhole Sagarika S, Bhole Sadashiv D, Jayshree J Upadhyay (2017).
A survey on indoor patient satisfaction in a private tertiary level surgical hospital in
central India. Int J Res Med Sci 2017; 5:4324-9.

Electronic Source

- <https://www.wikipedia.org>
- <https://emeralsinsight.org>
- <https://www.jcadonline.com>
- google scholar