

Using Patient Satisfaction as a Measure of Efficiency of the Services of Public Sector Hospitals

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Abstract: Patient Satisfaction survey in public sector hospitals in developing countries like India is a much sought-after topic. The data available on the same being very limited as patient survey or a patient satisfaction research in public sector healthcare unit is very rarely done; much less used as a tool to measure the efficiency of the public sector hospital. Measurement of efficiency in a public sector hospital is usually in terms of no. of patients treated, no. of patients/ doctor, no. of beds available as per local population, no. of patients discharged etc. This paper is an attempt to using patient satisfaction as a measure of efficiency in the South Asian geographical region of India, Sri-lanka and Pakistan.

Measurement Tools: The paper is based mainly on secondary research and academic databases. The research was conducted from search engines and academic databases using keywords like "patient satisfaction", "public sector hospitals" etc. Research papers and database manuals were carefully scrutinized and analysed.

Key Words: Patient satisfaction, Acute, Chronic, Geriatric.

Challenges confronting the public Hospitals in India: As per Vikas Bajpai, Modern day hospitals

have been described as monuments of disease. The evolvement of the modern hospitals; public or private is more towards curative care and the involvement of the modern hospitals in health improvement of the masses is low. These institutions are completely detached from the social, economic life of the common masses which largely affect the health. While the country's private sector healthcare boasts of the best medical facilities which attract patients from abroad in the form of medical tourism, the same advanced treatment remains a pipe dream for the larger section of the masses. That is not meant to interpret that the public sector hospitals do not have excellent doctors or excellent equipment; but the load on these hospitals being increasingly heavy nullifies the advanced addition in terms of equipment and manpower.

The major challenges facing the public sector hospitals today is deficiency in manpower and infrastructure, unmanageable patient load, and a high out of pocket expenses. The current scenario today is about 5.67 beds for a population 1000 in the public sector. As per Vikas Bajpai in his review article ' **The challenges confronting public healthcare in India** ' "the total rural population of Bihar was 92.07 million as per 2011 census, whereas the total number of required doctors (specialists and GDMOs) in rural health set-up as per Table5 is only 2773. This would amount to only 3doctors per 10,000 rural populations which by no standard is desirable. Even after seven years of implementation of NRHM (National Rural Health Mission), there remains a wide gap in the availability of allopathic doctors in the rural areas between the non-EAG states and EAG states. In the former, it is 2.25 times more" (**Review Article; The Challenges Confronting Public Hospitals in India, Their Origins, and Possible Solutions, Vikas Bajpai**)

A comparison of the availability of hospital beds for selected countries.

Country	Timor-Leste	Gabon	Equatorial-Guinea	Djibouti	Kenya	Botswana	Zambia
India (Beds/1000 population) 0.9	5.9	6.3	2.1	1.4	1.4	1.8	2.0

Source: World Development Indicators, World Bank Data Bank[3]. (Review Article; The Challenges Confronting Public Hospitals in India, Their Origins, and Possible Solutions, Vikas Bajpai)

Patient Satisfaction as a measure of efficient services (A perspective from neighbouring countries): As per thalini Tenakoon, a survey was made of the patients of physiotherapy departments in various hospitals in Sri-Lanka. According to the research; patient satisfaction is an import indicator of the quality of the services provided. A survey using a questionnaire was conducted of 150 patients in a large public hospital in Colombo. According to the paper, unlike other departments, the physiotherapy department faces competition from Ayurvedic and Allopathic departments. As a result it is imperative that with the increase in competition patient satisfaction becomes an important variable for measuring the effectiveness of the services. It was found that patients with acute symptoms showed a high level of satisfaction than the patients who were chronic cases. It was also found that geriatric patients expressed more satisfaction weather it was in chronic cases or acute cases as they seem to be more appreciative of the treatment as they needed more treatment. It was also found that their expectations were much lower than the expectations of the younger patients. It was also researched that women patients

expressed greater satisfaction than men patients. The key determinants of satisfaction are the duration of the treatment, frequency of the treatment and the adequacy of the time the therapist spends with the patient. The satisfaction expressed by the patient is directly proportional to the amount of time spent by the therapist with the patient. But keeping in mind the patient load of the therapists in any public sector hospital; the amount of time spent with the patient will always be a challenge which can affect the satisfaction expressed by the patient in the questionnaire. It was also found that longitudinal treatment patients expressed three time more the satisfaction than the patient treated by multiple physiotherapists. This is again likely to pose a challenge as it may be challenging to assign the same therapists to the patient every time. It was also found that lower satisfaction is likely to be associated with the increase in waiting time and adequacy of the waiting area. The communication skills of the therapists also affect the patient satisfaction as it reflects on the ability to convey the diagnosis and the line of Treatment. The participation ratings of the same were as follows:

Participant ratings on the correlates of patient satisfaction Correlate Rating (%) Spearmen's correlation

	Strongly agree	Agree	Disagree	Strongly disagree	Unsure	
Communication skills <0.001*	5.3	36.0	30.0	2.7	26	0.374
Giving advice <0.001*	6.7	43.3	19.3	0.7	30	0.392
Answering patients' questions 0.023*	2.0	30.0	0	40.0	28	0.186
Listening to patients' concerns 0.007*	0	28.7	48.0	2.0	21.3	0.219
Contact time <0.001*	0.7	33.8	56.1	2.7	6.8	0.316
Instructions- exercise programme <0.001*	18.0	61.3	8.0	0.7	12	0.608
Professionalism <0.001*	29.3	62.0	0	0	8.7	0.286
Treatment environment	22.0	27.3	47.3	0	3.3	0.259

0.001**

Significant ($p < 0.01$).

The study showed that 60% of the patients were highly satisfied whereas 29.3% moderately satisfied. This could be meant to interpret that either the services are of high standards or the patient As per Abid Hussain and Muhammed Sial, a research conducted in Pakistan, another developing country, it was found that the pharmacy and laboratory services had a significantly positive co-relationship than the doctor patient relationship. As per the same research, the developed countries are steadily developing their health care institutions to become revenue generators whereas the developing countries spend precious foreign exchange in treating their patients in these countries. The study was conducted taking into account four factors; physical infrastructure, doctor-patient relationship, laboratory services and pharmacy services.

(What Factors Affect Patient Satisfaction in Public Sector Hospitals: Evidence from an Emerging Economy. Abid Hussain 1, Muhammad Safdar Sial)

As per Nasim Kazemi, it is all the more important to measure patient satisfaction as an important tool for quality measurement as due to improvement in technology, patients are far better informed than before and hence in better position to understand their illnesses and well informed to question the line of treatment adopted by the physician or the hospital. Thus patient satisfaction measurement is not only an important tool of measurement but also an important data from the view point of taking strategic decisions in the long term. Thus patient satisfaction survey in a public hospital which would otherwise have been considered a mere formality not worth considering for further research has now assumed different dimensions as the patients have now started questioning the doctor. The economically deprived patient seeking treatment in a public sector hospital is not in a position to get himself treated in a private corporate hospital financially; but is technically armed and informed about his illness and the available remedies as affordable internet connection is available at his

expectation is low. **(Patient Satisfaction With Physiotherapy Services in an Asian Country: A report. Thalini Tenakoon, Piyanjali Zoysa)**

finger tips. As per Nasim Kazemi in "Measuring hospital service quality and its

influence on patient satisfaction: An empirical study using structural equation modeling " states that " Service quality is defined as "a global judgment or attitude relating to the overall excellence or superiority of the service" (Parasuraman et al., 1988). Also, service quality is defined as a customer's overall service quality evaluation by applying a disconfirmation model – the gap between service expectations and performance (Cronin Jr & Taylor, 1992; Potter et al., 1994). Perceptions of service quality enable providers of healthcare to detect services and processes in need of improvement. Providers perceive that satisfying patients can save them time and money spent on resolving patient complaints in future (Pakdil & Harwood, 2005)."

The SERVQUAL is an instrument being popularly used for measuring customer satisfaction across the healthcare industry. It measures 5 dimensions i.e Empathy, responsiveness, assurance, reliability and tangibles. It also measures the magnitude of the difference between perceived customer preference and expectations for the perceived service quality. (Parshuraman Et al 1988). There exists a reverse relationship between service quality and patient satisfaction and the same is divided into categories: the first category states that if a patient is satisfied he perceives the service as excellent whereas the second category proposes that a good quality service leads to a patient satisfaction. Amongst the five mentioned criteria, it was found that Assurance was the most significant factor the mattered in patient satisfaction whereas Empathy assumed the least importance.

(Measuring hospital service quality and its influence on patient satisfaction: An empirical study using structural equation modelling.

Nasim Kazemi*, Parisa Ehsani, Farshid Abdi and Mohammad Kazem Bighami)

As per Sodani, a patient survey carried out in district hospitals in Madhya Pradesh reported that 70% of the patients surveyed confirmed that while the behaviour of the staff was good but there was the inadvertent problem of over crowding which lead to a stress addition to the patient already under stress.

technology savvy and well informed about their own illnesses.

The developing countries which are in the topic of discussion have more than 75% of their population which falls into this demographic category which avails the facilities of the public sector healthcare units. Thus it becomes imperative that while the human resources employed in these institutions are performing to the best of their human abilities, the

(Assessing patient satisfaction for investigative services at public hospitals to improve quality of services P.R.Sodani1, Kalpa Sharma2)

Conclusion: The above discussion brings in the conclusion that patient satisfaction and patient opinion needs to be classified and researched in more detail as that will help healthcare unit frame its long term and short terms goals and improve their own existing services. While most of the patients surveyed as per the secondary research are patients usually at the bottom of the pyramid with limited education and sources of income, they are

government needs to further equip these units with more advanced technology, improve the number of human resources employed, also ensure that they have a career graph as that will stem the flow of the talent from the government sector to the high paying private sector.

Source Citation:

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