



# A Study on Patient Satisfaction: Differences in Private and Public Hospitals.

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## Abstract

**Background/Objectives:** Over the years the quality of care provided by healthcare organizations is measured through an important tool called patient satisfaction. It is important to understand the perceptions of patients on health care services in order to understand the expectations levels and thus the quality of services can be improved. Also such perception levels may differ across private and public hospitals. **Methods/Statistical analysis:** This study aims to understand such perceptual differences in the patient satisfaction level of private and public hospitals and also understand the various factors that influences patient satisfaction in a hospital. The study was conducted on 136 respondents who have visited a hospital earlier either private or public. Self-administered questionnaires were provided to the respondents and they were assessed on various factors such as front office services, doctor consultation, diagnostic services, hospital facilities etc. **Findings:** The study revealed that there was a significant relationship between doctor consultation, hospital facilities and patient satisfaction. Further it was also understood that the satisfaction levels were better in private hospitals when compared to public hospitals. **Improvements/Applications:** Such findings of various factors influencing patient satisfaction help the managers in create policies that address patient's perceptions. Thus help in improving the quality of services provided.

## Index Terms:

Patient satisfaction, Public hospitals, Private hospitals, Service quality, health care quality.

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## **I. INTRODUCTION**

Healthcare a fast-growing sector in India is one of the largest sectors in terms of revenue and employment. The rapid growth of the healthcare requirement in the country aids through Indian economy, the changing demographics and the socio-economic mix of the Indian population. As the demand for healthcare has sharply risen with the growing population and increasing levels of affordability, so is the demand for quality healthcare services. Over the years, the health requirements are addressed by public and private sectors of the country. However, it is believed that quality service is not only a patient's right in today's highly competitive world, but is also one of the key drivers to keep an edge and maximizing profits shares of the hospitals. Since healthcare has a more multi-layered set of responsibilities, improvement in the quality of services in the field has been an alarming factor.

Over the years the quality of care provided by healthcare organizations is measured through an important tool called patient satisfaction. It is very important for understanding the perception of customers on the delivery of healthcare services and also, as indicated by Donabedian [1], a key outcome of care. According to Torresand Guo [2], as patients trust their life and wellbeing on the hands of healthcare providers, it is very important to monitor patient satisfaction as it is a crucial component in determining an organization's effectiveness and it has to be a key factor of any quality improvement plans. Patient satisfaction creates an awareness for decision-makers in resource allocation. Various health care quality attributes are necessary to know patient priorities and preferences [3]. On the other hand, patients tend to come back for more and better service if they are satisfied with their service experience as and when the need arises [4]. Low patient satisfaction may result in poor compliance, waste of resources and suboptimal clinical outcomes.

Tucker [5] suggested that patients evaluating process can be understood by the individual patient characteristics that affect the patient's views on satisfaction. Healthcare organizations can improve patient's satisfaction from the information gained from the patient's viewpoint. Healthcare provider can enjoy long-term benefits from the patients who are satisfied with the service of the healthcare provider [4]. With the rapid rise in healthcare requirements, patient satisfaction has of late been the prerequisite of healthcare organizations [6].

Health-care managers deal with many issues in a hospital, however patient satisfaction has been the important issue. After all, high patient satisfaction leads to loyalty [7], and through loyalty patients will visit the hospitals in the future [8], [9]. Profitability of the hospital is measure by positive patient satisfaction [10]. Since patient satisfaction is considered as an important factor in the functioning of the hospitals, the organization which fails to understand this factor will lose customers forever. Thus, patient satisfaction is a key to exist in most health-care organizations. Some argue that outcome of quality care is patient satisfaction [1], [11, 12]. While others have contended that patient satisfaction is the most important performance metric for health-care delivery [13, 14].

### **A. Need for the study**

To maintain good health care quality, most of the developing nations in the recent times have seen patient satisfaction as a standard, to facilitate comparison says, [15]. For hospitals provide health services, the emphasis has often been satisfaction of the patients. However to ensure this patients must be rendered high end services [15, 16]. For the continuity of any business undertaking the only assurance is consumer satisfaction and retention, including hospitals [17]. Through this study we can understand different dimensions which the patients consider important for satisfaction and how those dimensions affected their overall satisfaction. It also help in understanding how the satisfaction differs in public and private hospitals.

### **B. Scope of the study**

The study was limited to the population in Mangalore and Udupi districts. The population chosen for the study based on their recent experience at a hospital and is not selected based on the particular hospital. This study will help us understand the factors that create satisfaction and also allows us to compare the satisfaction levels among private and public hospitals. The results can provide insights to the health administrators on the factors that influence satisfaction and key areas to improve on.

### **C. Objectives**

- To understand the level of patient satisfaction in public hospitals and private hospitals.
- To study the difference in satisfaction level in public and private hospitals with respect to doctor consultation.

- To the study the relationship between hospital facilities between hospital facilities and patient satisfaction.
- To understand the relationship between doctor consultation, hospital facilities, diagnostic services, front office services with patient satisfaction

#### **D. Hypothesis**

**H1:** There is a difference in satisfaction levels between private and public hospitals

**H2:** The level of patient satisfaction differs among private and public hospitals with respect to hospital facilities.

**H3:** The level of patient satisfaction differs among private and public hospitals with respect to doctor consultation.

**H4:** There is a positive relationship between doctor consultation, hospital facilities, diagnostic services, front office and patient satisfaction

## **II. LITERATURE REVIEW**

A pleasing level of consumption oriented fulfilment from health care services is patient satisfaction. In other words it is the overall gratification experience of a consumer from a product or service. Patient satisfaction ought to be as essential as quality assessment as to the framework and administration of health care systems, recommended a research study on measuring patient satisfaction by [1].

Professional administrators have guided health care services through their recommendations on delivery of services to patients, satisfying them and achieving loyal clients [18]. Information technology has resulted in clients having easy access to health care services, reason its quality and has also enabled comparison between the facilities provided [19]. Korkmaz *et al.*, [20] reveals that in 1956 in USA the nursing field first examined a client's satisfaction from health care services. To maintain good health care quality, most of the developing nations in the recent times have seen patient satisfaction as a standard, to facilitate comparison [15]. According to Kamcı, [15] and Gulmez, [16] for hospitals provide health services, the emphasis has often been satisfaction of the patients. However to ensure this patients must be rendered high end services. For the continuity of any business undertaking the only assurance is consumer satisfaction and retention, including hospitals [17]. The affluence of hospitals are largely ascertained by how it satisfies the customers or otherwise [21], [22].

According to the research of Sodani and Sharma [22], not only the hospital environment but also the quality of services offered, are noticed by the patients and therefore procurement of their satisfaction is of utmost importance. Patient satisfaction is the key element that determines if the expectation of patients are met. The perceived service is compared with the expectations and if they are above the standards set, the patients are delighted. They are even satisfied if the two elements equate, but if the actual service received is below their aspiration, they are disappointed. Thus the hospitals must pay heed to client's expectation and work on improving their services regularly [22]. The Indian study regarding patient satisfaction in hospitals have been few and in emergence, while the western countries have witnessed an excess of research studies in this regard since many years [23].

A study in public hospitals inpatients revealed that the patients were highly gratified with the services offered and technical skills of the doctors. However the behavioral issues of the nurses and staff, fell short [24]. Uttar Pradesh, one of the most populated state in the country surveyed inpatients and outpatients who paid visits to the community and primary health centers set up by the government. The patient satisfaction was determined in five categories, viz, medical information, availability of medicines, staff and doctor behavior and hospital infrastructure. The response was found to be above average and also revealed that outpatients were mainly influenced by doctor behavior while for the inpatients, the staff behavior played a vital role followed by the other categories [24].

A study on OPD patients of government health centers in Lucknow, resulted in a satisfactory response by the patients and drawbacks were found in the provision of basic amenities in the hospital premises such as non-availability of drinking water, proper sanitization and in-adequate doctor patient communication [25]. Sodani *et al* [25] conducted a survey of primary and community health centers of a few districts of Madhya Pradesh disclosed that patient satisfaction with the services offered in higher level were better than lower level, but to the contrary with doctor's communication.

Patient's response of top ranking hospitals of north India proved to be satisfactory with the health services but hitches were found in communication and cost effectiveness [26]. A study on Goa's public hospital found physician quality and staff support as main factors determining patient satisfaction, while non-clinical staff service did not play a vital part [27]. Chahal and Kumari [28] examined patient satisfaction in north Indian hospitals in variant dimensions such as ambience, communication and service performance and so on.

In a related study conducted by Chahal and Mehta [29] in hospitals of Jammu found key elements determining patient satisfaction as in-house facilities, nursing and hygiene. However it was found to be a multidimensional structure varying according to environments, history and culture. Image and profitability of a hospital is strongly influenced by the patient satisfaction level it attains [1], [30]. It further adds up to patient behavior through word of mouth [31] and to reduce patient grievances and wastage of time, health care providers are advised to pay heed to patients demands by categorizing the key elements [32].

### III. RESEARCH METHODOLOGY

#### A. Sources of data

Primary data was collected through structured questionnaires. The data was collected from willing participants of both private and public hospitals.

#### B. Measurement scale

The questionnaires were completed voluntarily. The patient satisfaction between private and public hospitals was measured using a scale developed by Avantika Tomar and Amit Dhiman [33] which was administered using 5 point likerts scale (1=very dissatisfied, 5= very satisfied). 25 questions were used to assess the patient satisfaction based on experience at a private or public hospitals. The items in the scale are doctor consultation, front office behavior, experience at pharmacy and diagnostics and facilities at the hospitals and overall experience. Four questions was asked about the demographics (age, sex, education and preferred hospital). Therefore total of 30 questions were used in this survey.

Secondary data was gathered from various publications, manuals, articles and journals from various sources from the Internet.

#### C. Sampling design

136 respondents were selected for the quantitative study. The respondents were chosen from Mangalore and Udupi regions using convenient sampling method. The respondents were from all the age groups, from the age of 18 to 40 years and above. People below the age of 18 years were excluded from the study. 91 responses were from private hospitals and 45 responses from public hospitals.

#### D. Tools used for the data analysis:

SPSS 20 software was used for data analysis. Various statistical tools were used to find out relationship and factors affecting to patient satisfaction and difference in the satisfaction level between private and public hospitals. To check the reliability of the study cronbach alpha was test was done. T test was used to check the relationship between two variables and regression was done to understand the relationship between the overall experiences with other variables.

#### E. Reliability of the scale

Reliability Statistics		
Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.955	.955	26

In order to measure the internal consistency or reliability, the Cronbach's Alpha is commonly used. The Cronbach's alpha was run on a sample of 136. The alpha co-efficient for the 26 items of patient satisfaction is 0.955, which means all items have relatively high internal consistency.

### IV. DATA ANALYSIS AND INTERPRETATION

The data collected was processed through SPSS 20. T was done to see the perceptual difference between private and public hospitals with respect to patient satisfaction, doctor consultation and hospital facilities. Regression analysis was done to obtain the relationship between independent variables doctor consultation, hospital facilities, diagnostic services and front office services with dependent variable hospital satisfaction.

#### A. Demographical profile

Table 1. DEMOGRAPHIC ANALYSIS

Variable	Category	Percentile
Age	18-25	45.6
	25-30	18.4
	30-40	16.9
	Above 40	19.1
Gender	Male	48.5
	Female	51.5
Educational level	SSLC	5.1
	PUC	14.7
	Graduate	44.9
	Post graduate	30.9
	Other	4.4
Preferred hospital	Private	66.9
	Public	33.1

The description of demographics is presented in the table. The analysis of the study revealed that it comprised of 51.5% of females and 48.5% of males. The age profile revealed that respondents of age profiles 18-25, 25-30, 30-40 and above 40 years comprised 45.6, 18.4, 16.9, and 19.1 percent dominated the study. The educational profile of the respondents revealed that 5.1 % were SSLC passed, 14.7 % PUC passed, 44.9% were graduates, 30.9% were post graduates and 4.4% belonged to the other category. Upon analyzing the 136 respondents it revealed that 66.9% preferred private hospital where as 33.1% preferred public hospitals.

### B. Testing of hypothesis

#### H1: There is a difference in satisfaction levels between private and public hospitals.

The data pertaining to the identified construct were treated using t-statistics (independent t-test) to examine whether the perceptions varies with respect to preferred hospitals.

The table 2 indicates that there is a significant difference in the patient satisfaction between private and public hospitals. This inference is validated by the low significant value 0.041 which is less than threshold value of 0.05, this result is also proved by, the mean value of patient satisfaction for private hospital is 3.727, whereas that of public hospital is 2.97 (table 2 ). It can be inferred that the satisfaction level is better in private hospitals than in public hospitals.

**Table 2.** DATA SHOWING DIFFERENCES IN PATIENT SATISFACTION BETWEEN PRIVATE AND PUBLIC HOSPITALS  
(a) GROUP STATISTICS

Preferred Hospital		N	Mean	Std. Dev.
Patient satisfaction	Private	91	3.727	0.536
	Public	45	2.970	0.621

#### (b) INDEPENDENT SAMPLE t TEST

		Levene's test for equality of variances	
Patient satisfaction	Equal variances assumed	F	Sig.
		4.249	0.041

#### H2: The level of patient satisfaction differs among private and public hospitals with respect to doctor consultation

The table 3 indicates that there is a significant difference in the consultation practices between private and public hospitals. This inference is validated by the low significant value of 0.024 which is less than threshold value of 0.05, this result is also proved by the mean value for doctor consultation for private hospital is 3.86, whereas

that of public hospital is 3.07 (table 3). It can be inferred that the satisfaction level is better in private hospitals than in public hospitals.

**Table 3.** DATA SHOWING DIFFERENCES IN PATIENT SATISFACTION WITH RESPECT TO DOCTOR CONSULTATION  
(a) GROUP STATISTICS

Preferred Hospital		N	Mean	Std. Dev.
Doctor consultation	Private	91	3.864	0.605
	Public	45	3.07	0.680

#### (b) INDEPENDENT SAMPLE t TEST

		Levene's test for equality of variances	
Doctor consultation	Equal variances assumed	F	Sig.
		5.328	0.024

#### H3: The level of patient satisfaction differs among private and public hospitals with respect to hospital facilities

The table 4 indicates that there is a significant difference in the hospital facilities provided in private and public hospitals. This inference is validated by the low significant value of 0.005 which is less than threshold value of 0.05, this result is also proved by the mean value for doctor consultation for private hospital is 3.75, whereas that of public hospital is 2.85 (table 4). It can be inferred that the satisfaction level is better in private hospitals than in public hospitals.

**Table 4.** DATA SHOWING DIFFERENCES IN PATIENT SATISFACTION WITH RESPECT TO HOSPITAL FACILITIES  
(a) GROUP STATISTICS

Preferred Hospital		N	Mean	Std. Dev.
Hospital facilities	Private	91	3.75	0.636
	Public	45	2.85	0.787

#### (b) INDEPENDENT SAMPLE t TEST

		Levene's test for equality of variances	
Hospital facilities	Equal variances assumed	F	Sig.
		8.041	0.005

#### H4: There is a significant relationship between doctor consultation, hospital facilities, diagnostic services, front office services with that of patient satisfaction.

Model summary from table 5.1 implies that correlation ad variance attained from regression analysis. It is proved from the model summary table that, there is a high level of correlation between the identified independent and dependent variable. As direction by R value 0.817, correlation has created

a variance of 0.668. The model explains 66.8% of the variance in patient satisfaction is explained by the contribution of independent variables. The anova table 5.2 explains the theoretical significance of the model. Since the significance value is 0.000, it can be interpreted that the independent variables has impact on dependent variable.

**Table 5. REGRESSION MODEL**

**(a) MODEL SUMMARY**

Model	R	R Square	Adjusted R Square	Std. error of the estimates
1	0.817	0.668	0.665	0.405

**(b) ANNOVA**

Regression	Sum of Squares	Df	Mean square	F	Sig.
	43.011	5	8.602	52.314	0.000

**(c) CO-EFFICIENTS**

Model	Unstandardized co-efficients		Standardized co-efficients	t	Sig.
	B	Std. error	Beta		
Constant	0.498	0.213		2.339	0.021
Front Office	0.56	0.69	0.060	0.806	0.422
Doc. Consultation	0.256	0.079	0.271	3.226	0.002
Diagnosics	0.129	0.070	0.158	1.849	0.067
Pharmacy	0.008	0.080	0.007	0.095	0.925
Facilities	0.357	0.085	0.418	4.223	0.000

Dependent variable: Patient satisfaction

Independent variable: Doctor Consultation, front office, pharmacy, diagnostics, facilities

**Estimated model:**

Patient satisfaction (overall satisfaction) = 0.498+0.256(doctor consultation) + 0.357(facilities).

## V. FINDINGS

As indicated in the results, there was a significant difference in the patient satisfaction levels between private and public hospitals. The satisfaction levels were better in private hospitals than in public hospitals and this findings supported by the zamil et al. [34] and khttak et al. [35]. Thus the H1 can be accepted. There was also a statistically significant relationship between doctor consultation, facilities in private and public hospitals. Private hospitals had better satisfaction level than public hospitals.

This can be explained by factors like time spent by the doctor during consultation, privacy maintained, involvement in decision making, cleanliness in the hospital, response to personal needs were found to be better in private hospitals than in public hospitals. Therefore the H2 and H3 can be accepted. This relationship was further proved by regression analysis that there is a statistically significant relationship between doctor consultation, hospital facilities and overall patient satisfaction. (p=0.002, p=0.000).

## VI. CONCLUSION

The study revealed that decision of choosing private hospitals was highly influenced by doctor consultation facilities and hospital facilities. Patients making decisions based on patient satisfaction are likely to choose private hospitals. Even though the services are expensive at private hospitals people still prefer private hospitals for the quality of treatment received for the price paid. Patients prefer being comfortably treated, hence they do not mind paying a higher cost. There was no significant relationship between front office services and patient satisfaction, although front office service plays a major role in creating impressions about the hospital.

## VII. MANAGERIAL IMPLICATIONS

Managers can understand the factor that can create patient satisfaction in a hospital and focus more on the aspects that can improve patient attitude. Hospitals can assess the quality of their services on a regular basis in order to keep the patient satisfied. The quality of services at public hospitals with respect to patient satisfaction has to be assessed extensively and find out the reasons for low satisfaction levels. Thus the managers can design new policies that could influence patient satisfaction thereby increasing the quality of services.

## VIII. LIMITATIONS AND FUTURE IMPLICATIONS

The study was conducted for a short duration of 4 weeks and is limited to population of Udupi and Mangalore districts and the perceptions may vary across various districts. The study focuses on general perceptions of people based on their visit to a hospital and patient may have had different experiences at different hospitals. The results cannot be generalized to all healthcare industries as

the study was limited to small region. Further research can be conducted on larger population covering wider regions to understand the perception levels better. Effects of gender and education did not have significant relationship with patient satisfaction in this study, even though there were such findings in various studies. So this can be studied extensively.

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