Original Article

An Emprical Study Towards Out Patients Perception Towards Services Quality Of Multi Speciality Hospitals - Scenirio Of Vellore District Tamilnadu

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Abstract

Customer satisfaction remains the most fascinating topic. The primary objective of organizations is to maximize profits while trying to reduce costs. Increasing sales with lower costs can increase profits. Customer satisfaction, which promotes customer loyalty, is part of sales growth. Patient satisfaction regarding health care is a multidimensional concept that now becomes a very crucial health care outcome. The behaviours of healthcare service providers have altered significantly in recent years as a result of technology innovation. Due to intense rivalry in the industry, the health care system is currently a challenge for all governments, states, political parties, and insurance companies. The private sector, previously dominated by non-profit/public hospitals, is now playing a larger role in health care delivery. This study the researcher has attempted to analyse the level of satisfaction of patients and their perceived quality of services provided by the hospitals. It is hoped that the health care providers would pay attention to quality in every aspect of patient care, both medical and non medical. As the patient satisfaction is the valuable asset of the health care providers, understanding the patient and believing that he is most important, goes a long way towards the success of every health care provider.

Key Words: Patients, Satisfaction, Hospital, Healthcare, Perspective, etc,

Introduction of the study

For businesses and scientists alike, customer satisfaction remains the most fascinating topic. The primary objective of organizations is to maximize profits while trying to reduce costs. Increasing sales with lower costs can increase profits. Customer satisfaction, which promotes customer loyalty, is part of sales growth (Wilson et al., 2008, p. 79). Customers always want to get as much satisfaction as possible with the product or service they purchase. In order to succeed in today's economy, businesses must build close relationships with their customers in addition to creating quality goods. Delivering greater value to target customers than competitors means developing client relationships (Kotler et al., 2002, p. 391)

The importance of patient happiness as a health outcome has grown. According to popular belief, satisfaction is an attitude reaction to patients' value assessments of their therapeutic interaction (Kane et al., 1997, p. 714). A definition of satisfaction based on the achievement of expectations might be stated openly or implicitly (Williams, 1995, p. 559). From our vantage point, a consumer's expectations for satisfaction are what they judge and ultimately decide whether to accept or reject a product or service based on.

Patient satisfaction regarding health care is a multidimensional concept that now becomes a very crucial health care outcome. The following factors were found in a meta-analysis of patient satisfaction with medical care: overall quality, trust, reputation, continuity, competence, information, organisation, facilities, and attention to psychosocial problems, humaneness, and treatment outcome (Hall & Dorman, 1988, p. 935). All of these elements

have a significant impact on the level of satisfaction as well as the level of service quality provided by healthcare institutions.

NEED FOR THE STUDY

Patient satisfaction is the health care recipient's reaction to aspects of his or her service experience. Patient satisfaction belongs to the service dimension as opposed to the technical dimension of quality of care. Most patients report few problems related to technical quality of care in hospitals and more over do not feel qualified to judge technical quality and therefore assume technical competence. The study suggested that the management should put more effort in improving the facilities and cleanliness. As a health care institution, hygiene is very important to prevent any infection and worsen the patient's condition. Both government and private hospital are controlled by Ministry of Health (MOH). They are referring to the same standard but it depends on the management to implement it and to serve the patients. As revenue affects the survival of private hospital, the management must monitor the service quality continuously to ensure that the patients are satisfied and willing to revisit again. Customer loyalty is influenced by the satisfaction. Thus, identify the service quality that affecting the patients' satisfaction is helpful in planning the marketing strategy. The policy-makers are able to implement and provide better service to the patient so that they will visit the same health care institution again.

OBJECTIVES OF THE STUDY

The study in its broad perspective deals with the patient satisfaction in health care services offered by the private hospitals. In tune with this the following specific objectives have been framed.

1. To review the growth and development of health care services in India in general and Vellore district in particular.

2. To study the awareness of patients towards health care services of the private hospitals.

3. To study the criteria used by the patients in choosing the hospital service providers.

4. To examine the level of satisfaction of patients and the factors influencing their level of satisfaction.

5. To evaluate the quality of health care services provided by the private hospitals.

6. To offer suggestions in enhancing the quality of hospital services and patient satisfaction.

REVIEW OF LITERATURE

1. **Mohammed Eid Mahfouz et al, (2021)** a move-sectional on line survey changed into performed the use of a pre-examined and tested questionnaire. The Arabic model of the National Health Service (NHS) and Quality Hospital Solutions (QHS) changed into used to accumulate responses from sufferers. Inclusion standards covered sufferers handled in any health centre, public or non-public and person sufferers (over 18 years of age). Exclusion standards covered seriously unwell sufferers (CCU and ICU sufferers) and illiterate sufferers. Satisfaction rankings in diverse sub domains associated with health centre offerings have been measured and subjected to statistical evaluation the use of the Statistical Package for the Social Sciences ver.23 the use of appropriate importance tests.

2. **Mitra Sadeghi.et al., (2021)** The motive of this look at changed into to assess affected person delight with hospitalization expenses and health center expenses after the implementation of the fitness device plan in Jahrom town hospitals in 2018. This is a descriptive-correlational look at. 556 sufferers hospitalized in Peymaniyah and Motahari hospitals have been randomly decided on. Data have been accumulated the use of a questionnaire to decide the extent of delight with the supply of health center offerings. To verify the validity of the questionnaire, the questionnaire changed into designed the use of the technique of formal and conceptual validity and to affirm reliability primarily based totally on Cronbach's alpha coefficient of 0.89. Data have been analyzed the use of frequency and percent frequency calculations in addition to one-way evaluation of variance the use of SPSS-22 statistical software.

According to the effects, there's a considerable distinction in assembly the expenses of hospitalization and health center offerings after the implementation of fitness device plans in Jahrom town hospitals with inside the regions of nursing offerings, nutrition offerings, diagnostic offerings (radiology/laboratory), accounting, coverage and carrier management. These elements additionally had extraordinary effects with inside the two hospitals.

3. **Dr.K.Veeraraghavan (2021)** Analyses the general public fitness coverage must be making sure the accessibility and affordability to number one fitness take care of all the humans. Health care is the essential proper of the humans then most effective the humans can stay with inside the international for a protracted time. In this look at the bulk of the sufferers happy with the fitness offerings supplied with the aid of using Private Hospitals in Thirualluvar District.

4. **Amporfro et al. (2021)** this look at used information from the 2014 Ghana Demographic and Health Survey and systematically sampled an overall of 12,831 families with reproductive girls elderly 15-49. Conversation. Data for this look at have been analyzed quantitatively the use of descriptive data, chi-rectangular, and regression evaluation. An overall of 3648 girls have been covered in this look at, and the very last evaluation for this reason covered a weighted pattern of 3507 girls. In the look at and reliability check the use of Cronbach Alpha (α), delight signs have been mixed into SERVQUAL dimensions. All information analyses have been performed in STATA thirteen.0. Adjusted odds ratios (AORs) with corresponding 95% confidence intervals (CIs) have been calculated. The evaluation confirmed that, independently of every different, schooling and faith have been appreciably related to carrier reliability, typical delight, and responsiveness. Payment alternative changed into additionally related to responsiveness and tangibility dimensions. In addition, region of house changed into independently related to receptiveness, tangibility, and typical delight. Finally, maternal age, region, company friendliness, ease of acquiring care, and hours of operation have been independently related with reliability, responsiveness, tangibility, and typical carrier delight on the multivariate degree.

5. **Babatola et al. (2022)** This look at assessed affected person delight with fitness care offerings and identifies elements related to affected person delight in decided on fitness centres in Ondo State. Gender, degree of schooling and career are predictors of delight with fitness offerings. Health care vendors want to paintings on fitness care transport to enhance care recipients' delight with care.

RESEARCH METHODOLOGY

RESEARCH DESIGN

Descriptive research

A pilot study was conducted with 78 respondents to test for its reliability. For the study the final Questionnaire was framed checking the alpha (Cronbash) values. Respondents' were selected from different zones in Vellore district of Tamilnadu. The reliability for the pilot study was tested statistically using Cronbach's Alpha and it was found to be 0.795.

In the current research study the sampling technique, used is stratified convenient. In which Vellore district is stratified. In each of the zone in the Vellore district were considered as a strata, the samples were chosen from each strata using convenient sampling technique. The population is all the private hospital patients belong to Vellore district. Respondents were contacted personally and administered the questionnaire.

SAMPLE SIZE

The sample size for the current study is 658

HYPOTHESIS

H_0: There is no significant relationship between age and the patient satisfaction in terms of the factors Registration Service, Physicians' competence and medical care, Nursing care, Room environment, Dietary Services, Discharge process and Billing, and Supporting staff.

H_0: There is no significant relationship between monthly income and the patient satisfaction in terms of the factors Registration Service, Physicians' competence and medical care, Nursing care, Room environment, Dietary Services, Discharge process and Billing, and Supporting staff.

H_0**:** There is a significant relationship exists among the various factors of patients satisfaction towards hospital services

DATA ANALYSIS AND INTERPRETATION

MULTIPLE REGRESSION ANALYSIS

Table showing regression analysis of the patient's satisfaction dimension towards hospital services

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**
Registration Service (X_1)	0.445 (0.387)	0.212	17.604 p=0.000*	3.207	.000
Physicians' competence and medical care (X_2)		0.464		3.450	.000
Nursing care (X_3)		0.219			
Room environment (X_4)		0.201		3.800	.000
Dietary Services (X_5)		0.214		4.274	.000
Discharge process and Billing (X_6)		0.412		3.218	.000
Supporting staff (X_7)		0.248		2.314	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Registration Service (**X_1**), Physicians' competence and medical care (**X_2**), Nursing care (X_3), Room environment (X_4), Dietary Services (X_5), Discharge process and Billing (X_6), and Supporting staff (X_7). The coefficient of Determinant R^2 is 0.411 and Adjusted R^2 is 0.387 indicates that the Test of association and all the five independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.212 (Registration Service) + 0.464 (Physicians' competence and medical care) + 0.219 (Nursing care) + 0.201 (Room environment) + 0.214 (Dietary Services) + 0.412 (Discharge process and Billing) + 0.248 (Supporting staff).

The regression model's ANOVA F value is 17.604 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0. 445, which shows that 44**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Registration Service (**X_1**), Physicians' competence and medical care (**X_2**), Nursing care (X_3), Room environment (X_4), Dietary Services (X_5), Discharge process and Billing (X_6), and Supporting staff (X_7) . The R-squared value is significant at 1 % level.

Table showing regression analysis of the dimension Registration Service towards its attributes

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**
Reception Services (X_1)	0.385 (0.357)	0.301	9.044 p=0.000*	1.710	.000
Availability of information (X_2)		0.238		2.452	.000

Waiting time for admission (X_3)		0.311		2.941	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Reception Services (**X_1**), Availability of information (**X_2**), Waiting time for admission (X_3). The coefficient of Determinant R^2 is 0.385 and Adjusted R^2 is 0.357 indicates that the Test of association and all the three independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.301 (Reception Services) + 0.238 (Availability of information) + 0.311 (Waiting time for admission)

The regression model's ANOVA F value is 9.044 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0. 385, which shows that 38**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Registration Service (**X_1**), Availability of information (**X_2**), Waiting time for admission (X_3). The R-squared value is significant at 1 % level.

Table showing regression analysis of the dimension Physicians' competence and medical care towards its attributes

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**
Professional competence of doctors (X_1)	0.515 (0.498)	0.318	8.258 p=0.000*	2.127	.000
Time spent by the doctor for diagnosis (X_2)		0.267		3.124	.000
Explanation about the health and treatment (X_3)		0.208		4.125	.000
Attitude and behaviour (X_4)		0.255		2.845	.000
Willingness to listen/answer patient's questions (X_5)		0.261		2.274	.000
Psychological support (X_6)		0.126		2.488	.000
Health education provided (X_7)		0.139		3.014	.000
Daily visit (X_8)		0.357		3.120	.000
Professional appearance (X_9)		0.254		2.104	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Professional competence of doctors (**X_1**), Time spent by the doctor for diagnosis (**X_2**), Explanation about the health and treatment (X_3), Attitude and behaviour (X_4), Willingness to listen/answer patient's questions (X_5), Psychological support (X_6), Health education provided (X_7), Daily visit (X_8) and Professional appearance (X_9) . The coefficient of Determinant R^2 is 0.498 and Adjusted R^2 is 0.489 indicates that the Test of association and all the seven independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.318 (Professional competence of doctors) + 0.267 (Time spent by the doctor for diagnosis) + 0.208 (Explanation about the health and treatment) + 0.255 (Attitude and behaviour) + 0.261 (Willingness to listen/answer patient's questions) + 0.126 (Psychological support) + 0.139 (Health education provided) + 0.357 (Daily visit) + 0.254 (Professional appearance).

The regression model's ANOVA F value is 8.258 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0. 515, which shows that 51**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Professional competence of doctors (**X_1**), Time spent by the doctor for diagnosis (**X_2**), Explanation about the health and treatment (X_3), Attitude and behaviour (X_4), Willingness to listen/answer patient's questions (X_5), Psychological support (X_6), Health education provided (X_7), Daily visit (X_8)and Professional appearance (X_9) . The R-squared value is significant at 1 % level.

Table showing regression analysis of the dimension nursing care towards its attributes

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**
Nursing skill (X_1)	0.453 (0.421)	0.331	10.445 p=0.000*	3.257	.000
Attitude and behaviour (X_2)		0.304		3.530	.000
Promptness in meeting needs (X_3)		0.221		2.954	.000
Medication at regular intervals is in time (X_4)		0.252		3.148	.000
Psychological support (X_5)		0.142		2.514	.000
Professional appearance (X_6)		0.284		2.128	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Nursing skill (**X_1**), Attitude and behaviour (**X_2**), Promptness in meeting needs (X_3), Medication at regular intervals is in time (X_4), Psychological support (X_5), and Professional appearance (X_6) . The coefficient of Determinant R^2 is 0.453 and Adjusted R^2 is 0.421 indicates that the Test of association and all the six independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.331 (Nursing skill) + 0.304 (Attitude and behaviour) + 0.221 (Promptness in meeting needs) + 0.252 (Medication at regular intervals is in time) + 0.142 (Psychological support) + 0.284 (Professional appearance) .

The regression model's ANOVA F value is 10.445 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0. 453, which shows that 45**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Nursing skill (**X_1**) Attitude and behaviour (**X_2**), Promptness in meeting needs (X_3), Medication at regular intervals is in time (X_4), Psychological support (X_5), and Professional appearance (X_6). The R-squared value is significant at 1 % level.

Table showing regression analysis of the dimension Room environment towards its attributes

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**

Calm and Quietness in room (X_1)	0.509 (0.483)	0.159	9.465 p=0.000*	2.871	.000
Bed size and quality (X_2)		0.214		3.350	.000
Facilities (Fan, water, sanitation, etc) (X_3)		0.241		2.369	.000
Cleanliness (X_4)		0.264		2.817	.000
Appearance (X_5)		0.307		2.128	.000
Ventilation (X_6)		0.341		2.148	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Calm and Quietness in room (**X_1**), Bed size and quality (**X_2**), Facilities (Fan, water, sanitation, etc) (X_3), Cleanliness (X_4), Appearance (X_5), and Ventilation (X_6) . The coefficient of Determinant R^2 is 0.509 and Adjusted R^2 is 0.483 indicates that the Test of association and all the six independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.159 (Calm and Quietness in room) + 0.214 (Bed size and quality) + 0.241 (Facilities (Fan, water, sanitation, etc)) + 0.264 (Cleanliness) + 0.307 (Appearance) + 0.341 (Ventilation).

The regression model's ANOVA F value is 9.465 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0.509, which shows that 51**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Calm and Quietness in room (**X_1**)**,** Bed size and quality (**X_2**), Facilities (Fan, water, sanitation, etc) (X_3), Cleanliness (X_4), Appearance (X_5), and Ventilation (X_6). The R-squared value is significant at 1 % level.

Table showing regression analysis of the dimension Dietary Services towards its attributes

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**
Timeliness of food served (X_1)	0.325 (0.321)	0.218	8.224 p=0.000*	3.467	.000
Diet (X_2)		0.328		3.110	.000
Menu (X_3)		0.242		3.118	.000
Taste (X_4)		0.197		2.246	.000
Temperature of food served (X_5)		0.161		2.681	.000
Containers (X_6)		0.112		3.459	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Timeliness of food served (**X_1**), Diet (**X_2**), Menu (X_3), Taste (X_4), Temperature of food served (X_5), and Containers (X_6). The coefficient of Determinant R^2 is 0.325 and Adjusted R^2 is 0.321 indicates that the Test of association and all the six independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.218 (Timeliness of food served) + 0.328 (Diet) + 0.242 (Menu) + 0.197 (Taste) + 0.161 (Temperature of food served) + 0.112 (Containers).

The regression model's ANOVA F value is 8.24 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0.325, which shows that 32**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Timeliness of food served (**X_1),** Diet (**X_2**), Menu (X_3), Taste (X_4), Temperature of food served (X_5), and Containers (X_6). The R-squared value is significant at 1 % level.

Table showing regression analysis of the dimension Discharge process and Billing towards its attributes

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**
Presenting and explanation of the bill (X_1)	0.521 (0.517)	0.278	5.785 p=0.000*	2.467	.000
Discharge instructions (X_2)		0.354		2.436	.000
Discharge summary (X_3)		0.308		2.439	.000
Time taken for the patient to leave the hospital (X_4)		0.381		3.813	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Presenting and explanation of the bill (**X_1**), Discharge instructions (**X_2**), Discharge summary (X_3), and Time taken for the patient to leave the hospital (X_4) . The coefficient of Determinant R^2 is 0.521 and Adjusted R^2 is 0.517 indicates that the Test of association and all the four independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.278 (Presenting and explanation of the bill) + 0.354 (Discharge instructions) + 0.308 (Discharge summary) + 0.381 (Time taken for the patient to leave the hospital) .

The regression model's ANOVA F value is 5.785 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0. 521, which shows that 52**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Presenting and explanation of the bill (**X_1),** Discharge instructions (**X_2**), Discharge summary (X_3), and Time taken for the patient to leave the hospital (X_4). The R-squared value is significant at 1 % level.

Table showing regression analysis of the dimension supporting staff towards its attributes

Independent variables	**R^2 (Adj. R^2)**	**Standardized coefficient Beta**	**F - Value**	**t - value**	**Sig**
Skill & knowledge of the supportive staff (X_1)	0.364 (0.322)	0.254	13.684 p=0.000*	3.207	.000
Promptness in meeting needs (X_2)		0.387		3.450	.000
Care & concern (X_3)		0.259		2.548	.000
Appearance (X_4)		0.261		3.800	.000

Note: ** Denotes 1% level of significance

Table exposes the predicted values obtained as a linear combination of Skill & knowledge of the supportive staff (**X_1**), Promptness in meeting needs (**X_2**), Care & concern (X_3), Appearance (X_4). The coefficient of Determinant R^2 is 0.364 and Adjusted R^2 is 0.322 indicates that the Test of association and all the five independent variables is positive.

The Multiple Regression Equation is:

Y = constant +0.254 (Skill & knowledge of the supportive staff) + 0.387 (Promptness in meeting needs) + 0.259 (Care & concern) + 0.261 (Appearance).

The regression model's ANOVA F value is 13.684 and it is significant at 1% level. **The Coefficient of Determination R-square** measures the goodness-of-fit of the model. Therefore the **R-square value is** 0.364, which shows that 36**%** of the variation in adjustment is described by the expected Sample Regression Plane (SRP) that uses the Independent Variables such as Skill & knowledge of the supportive staff (**X_1),** Promptness in meeting needs (**X_2**), Care & concern (X_3), and Appearance (X_4). The R-squared value is significant at 1 % level.

CONCLUSION

This study the researcher has attempted to analyse the level of satisfaction of patients and their perceived quality of services provided by the hospitals. It is hoped that the health care providers would pay attention to quality in every aspect of patient care, both medical and non medical. In the present situation where the globe is facing the crises of Covid-19 and trying to overcome from it and India takes a better step towards the field of medical care and overcame the challenges and manage it in a better way. The services provided by the hospital are tremendous and the way of tackling the crises is also appreciated. In terms of patients satisfaction it is out of the services rendered by the hospital keeping the various factors which leads to the helping the patients in their tough time and leads to create the trust and faith of the patients. As the patient satisfaction is the valuable asset of the health care providers, understanding the patient and believing that he is most important, goes a long way towards the success of every health care provider.

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