

Hospital Services and Level of Satisfaction of Patients in Kanyakumari District

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Abstract:-The enjoyment of the highest attainable standard of health is one of the fundamental rights of human beings. Due to the change in food habits, lifestyle and environment pollution, the diseases have increased and the people need hospital services frequently for their wellbeing. In this era of information, consumer's expectation is high towards healthcare. They demand a higher level of accuracy, reliability and overall better services than in the past. The services provided in Government hospitals are not very good so, many people approach private hospitals for their wellbeing. This has paved way for the mushroom growth of private hospitals in Kanyakumari district and there is severe competition among the service providers. An attempt has been made in this paper to measure the level of satisfaction of the respondents towards hospital services and to offer suggestions to overcome the competition.

Key words: Hospital services, Level of satisfaction of patients.

INTRODUCTION

The preamble of the World Health Organisation (WHO) states that health is the state of complete physical, mental and social well-being, and not merely the absence of disease or infirmity. Health is a multi-dimensional phenomenon. It is both an end and means of development strategy. A nation with good health tends to be productive and that productivity leads to the upliftment of economic and societal development. This development in turn, tends to improve the indicators of health status and quality of life. If the quality of human capital is not good, physical capital and natural resources cannot be properly utilized and growth can neither be sustained nor be qualitative.

Health is one of the major segments of human capital. In an over populated country like India, where a majority of the population is found below the poverty line, hospitals and healthcare centres are responsible for the wellbeing of the rural populace.

STATEMENT OF THE PROBLEM

There is an old adage that health is wealth. Health is more important for human beings to survive in this world. Happiness is nothing more than good health. The living conditions, life styles, preferences, bad food habits, physical inactivity, wrong body posture, stress and distorted biological clock are found to be the causes for diseases. Government hospitals are offering treatment free of cost but the services provided are not very good. The rural health centers have virtually become non-existent because of so many reasons like inadequate financial assistance from the government, unavailability of doctors, lack of hygiene, dearth of commitments on the part of the staff and inefficient administration. Many people approach private hospitals for their wellbeing and this has paved way for the mushroom growth of private hospitals in Kanyakumari district. The hospitals are becoming business centers and there is severe competition among the service providers. In order to overcome the competition and attract clients, they are forced to provide quality services to their patients. The researcher is interested to find out whether the patients in the district are satisfied with the hospital services. So the study is undertaken.

OBJECTIVES OF THE STUDY

The general objective of this paper is to know the level of satisfaction of the respondents towards hospital services in Kanyakumari district.

The specific objective are

- To find out the factors that provide satisfaction to the respondents while availing hospital services.

- To analyse the association between profile variables and level of satisfaction of respondents towards hospital services.
- To give suggestions for improvement.

METHODOLOGY

The study comprises of both primary and secondary data. The primary data were collected using interview schedule. 520 samples were selected using multi stage stratified random sampling technique. 52 hospitals have been selected at random and from these 52 hospitals, 10 sample respondents (5 inpatients and 5 out patients) were selected at random from every hospital. Secondary data were collected from books, journals, magazines and newspapers. The collected data were analysed with the help of mean, standard deviation and chi-square test.

DATA AND DISCUSSION

SATISFACTION OF PATIENTS TOWARDS HOSPITAL SERVICES

Customer satisfaction is a measure of how products and services supplied by a concern meet or surpass customer expectation. It is defined as “the number of customers or percentage of total customers whose reported experience with a firm, its products, or its services(ratings) exceeds specified satisfaction goals.ⁱⁱ Customer satisfaction is a key differentiator and increasingly has become a key element of business strategy.ⁱⁱⁱExpectations are the key factor behind satisfaction. When customers have high expectations and the reality falls short, they will be disappointed and will likely rate their experience as less than satisfying.^{iv}

Customer satisfaction, with a specific service encounter, depends on pre-existing or contemporary attitudes about service quality.^v Customer satisfaction and perceived service quality are positively related to behavioural intentions.^{vi} Favourable disconfirmation (when performance exceeds

expectations) can positively affect satisfaction.^{vii} Customer satisfaction was measured with the help of consumer comfort in service relationships as stated by Oliver.^{viii} It is measured with the help of comfortableness with the service provider, relationship with the service provider, trust on the service provider, commitment of the service provider and activeness of the service provider. On the whole, twelve variables related to the above said five aspects were included to measure the customer satisfaction towards healthcare services.^{ix}

Mean score of level of satisfaction of inpatients, outpatients and total respondents are presented in Table 1.

Table 1
Mean score for level of satisfaction

S. No.	Particulars	Mean Score		
		Inpatients	Outpatients	Total Respondents
1	Experience with this hospital	2.01	2.06	2.03
2	My choice of this hospital	2.05	2.20	2.13
3	Employee behavior	2.05	2.19	2.12
4	Accessibility to the hospital	1.90	2.20	2.05
5	Trust worthiness of the hospital	2.11	2.10	2.10
6	Customer's orientation of the hospital	2.14	2.24	2.19
7	Handling of complaints	2.23	2.31	2.27
8	Reporting system of the hospital	2.31	2.29	2.30
9	Quality of the Service	2.53	2.36	2.44
10	Cost of the services offered	2.40	2.54	2.47
11	Bio medical waste disposal	2.74	2.53	2.64
12	Existence of complaint / suggestion box	2.55	2.78	2.67

Source: Primary data.

Table 1 shows that among the 260 inpatients, the mean score (2.74) is high for bio medical waste disposal and low '1.90' for accessibility to the hospital. It is evident that the inpatient respondents are highly satisfied with the bio medical waste disposal in hospitals and they are not satisfied with the accessibility to the hospital, as the hospitals are located only in urban areas. Among

the outpatients, the mean score is high '2.78' for 'existence of complaint or suggestion box, and the mean score is low '2.06' for 'experience with the hospital'. Among the total 520 respondents, the mean score is high '2.67' for 'existence of complaint or suggestion box' and the mean score is low '2.03' for 'experience with hospital'. The outpatient and total respondents are highly satisfied with complaint or suggestion box fixed in the hospital and they are not satisfied with the 'experience they face in the hospital'. They have to travel a long distance and wait for a long time in the hospital. The personnel in the hospitals are not friendly with them and they will not clearly explain about the diseases.

CATEGORIZATION OF LEVEL OF SATISFACTION

On the basis of level of satisfaction scores, the inpatients and outpatients are categorized into three. They are,

- (i) Patients with high level satisfaction
- (ii) Patients with moderate level satisfaction
- (iii) Patients with low level satisfaction

In order to categorize the patients the respective scores have been averaged and the mean is calculated. Their respective standard deviation is calculated. The boundary levels of categorization are worked out by using formulax $\pm\sigma$. Thus, the upper boundary for low satisfaction is worked out as $x-\sigma$. The lower boundary for higher satisfaction is worked out as $x+\sigma$.

Table 2 presents the scores of the three categories of patients.

Table 2
Details of Scores

Sl. No	Type of Patients	Level of Satisfaction(Satisfaction Scores)		
		Low	Moderate	High
1	Inpatients	Below 19	19-31	Above 31
2	Outpatients	Below 15	15-34	Above 34
3	Total Respondents	Below 21	21-34	Above 34

Source:Computed data.

Table 2 shows the boundary levels for the three categories of patients. It is clear from the table that the inpatients are those with low (below 19), moderate (19 to 31) and high levels of satisfaction (above 31). The outpatients scored below 15 points are categorized as outpatient with low level of satisfaction, 15 to 34 as having moderate level of satisfaction and the respondents who scored above 34 points are categorized as outpatients with high level of satisfaction. The total respondents who scored below 21, 21 to 34, above 34 points are categorized as those with low, moderate and high level of satisfaction respectively.

Patients are categorized into three on the basis of their satisfaction and the details are furnished in Table 3.

Table 3
Level of Satisfaction

Sl. No	Type of Patients	Level of Satisfaction			Total
		Low	Moderate	High	
1	Inpatients	40(15.4)	166(63.8)	54(20.8)	260(100)
2	Outpatients	64(24.6)	159(61.2)	37(14.2)	260(100)
3	Total Respondents	104(20)	325(62.5)	91(17.5)	520(100)

Note : Figures in parenthesis denote the percentage.

Source:Computed data.

Table 3 reveals that among the inpatients, 40 respondents (15.4 per cent) have low level of satisfaction, 166 respondents (63.8 per cent) have moderate level of satisfaction and 54 respondents (20.8 per cent) have high level of satisfaction. Among the outpatients, 61.2 per cent of the respondents show moderate level of satisfaction, 24.6 per cent of the respondents show low level of satisfaction and only 14.2 per cent of the respondents show high level of satisfaction. Among the total respondents, 20 per cent of the respondents have low level of satisfaction, 62.5 per cent of the

respondents have moderate level of satisfaction and 17.5 per cent of the respondents have high level of satisfaction.

ASSOCIATION BETWEEN PROFILE VARIABLES AND LEVEL OF SATISFACTION OF RESPONDENTS

The level of satisfaction differs from one patient to another. The level of satisfaction depends upon socio economic conditions of patients. In order to examine whether there is any significant relationship between socio economic conditions of patients and level of satisfaction, the chi-square test is applied and the results are presented below.

Table 4
Association between Profile variables and Level of Satisfaction of Respondents

S. No.	Profile Variables	Calculated value			Table value	Level of Significance	Significance		
		Inpatient	Out Patient	Total Respondents			Inpatient	Out Patient	Total Respondents
1	Age	9.867	5.864	3.657	15.507	5 Per cent	In significant	In significant	In significant
2	Gender	0.202	1.048	3.138	5.990	5 Per cent	In significant	In significant	In significant
3	Marital Status	14.478	13.012	11.035	9.490	5 Per cent	Significant	Significant	Significant
4	Family Size	1.510	9.456	14.242	9.490	5 Per cent	In significant	In significant	Significant
5	Area of Residence	5.510	2.205	29.972	9.490	5 Per cent	In significant	In significant	Significant
6	Educational Level	31.725	37.189	25.684	23.700	5 Per cent	Significant	Significant	Significant
7	Occupation	32.512	41.429	9.095	21.000	5 Per cent	Significant	Significant	In significant

8	Monthly Income	43.821	34.745	10.331	18.300	5 Per cent	Significant	Significant	In significant
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Source: Computed Data

Table 4 shows that the highly associating profile variables with the level of satisfaction are marital status of inpatient, outpatient and the total respondents, family size and area of residence of the total respondents, educational level of inpatient, outpatient and total respondents, occupation and monthly income of inpatient and out patients. Other profile variables like age and gender have no significant association with their level of satisfaction towards hospital services.

SUGGESTIONS

The suggestions given by the researcher are

- The government can monitor the hospitals in terms of quality services, so that the people in the rural area and the poor may not approach private hospital for their treatments.
- Hospital management can appoint trained and experienced doctors and nurses who are able to clear the doubts and handle the patients with care.
- Hospitals can be constructed in places with frequent transporting facilities so, that it will be accessible by the public.
- The personnel in the hospitals must be friendly with patients and they must clearly explain about the diseases to them.
- The government should take steps to increase the numbers of hospitals, beds and physicians in the district, especially in rural areas.
- Adequate number of staff can be appointed from reception to billing section to take care of patients in order to avoid crowd and to reduce the waiting hours.

CONCLUSION

Hospitals are social institutions which must give due weightage to public interests. It is clear from the study that both the inpatients and outpatients in Kanyakumari are only moderately satisfied with the services provided by the hospitals. Customer satisfaction is one of the most essential elements of customer retention, customer loyalty and repurchase. The art and science of customer satisfaction involves strategically focusing on creating and reinforcing pleasurable experiences, so that they may retain the existing patients and get new ones. The hospitals must concentrate in patient satisfaction which is the need of the hour.

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