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A STUDY ON PATIENT'S SATISFACTION TOWARDS SERVICE QUALITY OF GOVERNMENT HOSPITALS WITH SPECIAL REFERENCE TO TIRUNELVELI DISTRICT

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Abstract:

Health status of the people has direct links to the socio-economic development of any country. Quality health care for people is one of the top priorities in the political agenda of most of the countries. It is evident that there is an increased tendency by the private sector health care service providers to invest in the sector which has brought about a severe competition to the Government sector hospitals. In such a context, provision of health services by the Government sector institutions with consistent quality is becoming more important. Providing high service quality is one of the main functions of health systems. Measuring service quality is the basic prerequisite for improving quality. Better quality and improved services to the customers is the need and primary goal for service organizations like health care and it is the ability of service providers to provide promised and expected services of customers according to their perceptive. The aim of this paper is to measure the quality of services in the Government hospitals of Tirunelveli District, as it is one of the most important cities in Tamil Nadu. A sample size of one hundred and fifty respondents is selected for this research from Tirunelveli Government Hospital. Required data were collected based on a standard questionnaire by Convenience Sampling method. The result of this study indicates that quality service is an important factor for patient's satisfaction. Appropriate findings and suggestions are given in the Study.

I. INTRODUCTION

Health care has become one of India's largest sectors both in terms of revenue and employment. Health care comprises of hospitals, medical devices, clinical trials, outsourcing, telemedicine, and medical tourism, and health, insurance and medical equipment. In 2015, the Indian health care sector become the fifth largest employer, both in terms of direct as well as indirect employment, with total direct employment 4,713,061 people. India is expected to rank amongst the top three heath care markets in terms of incremental growth of 2021.

The relationship between health and development is mutually reinforcing- whereas health contributes to economic development, in turn, tends to enhance the health standing of the population in an exceedingly country. India as a nation has been growing economically at a speedy pace significantly when the appearance of New economic policy of 1991. However, this rapid economic development has not been

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accompanied by social development particularly health sector development. Therefore, the present status upon health care sector slowly falls downwards. Health sector has been accorded very low priority in terms of allocation of resources, whereas the public expenditure on health is less than 1 percent of GDP in India. Various services rendered by government hospitals are as follows

- 1. Emergency services
- 2. Ambulance services
- 3. Diagnostic services
- 4. Pharmacy services
- 5. Causality services

II. REVIEW OF LITERATURE

Customer satisfaction as term that clarifying regarding a measurement of services or products that provided to meet

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As per Anwar & Louis, 2017, Customer satisfaction as term that clarifying regarding a measurement of services or products that provided to meet customer's expectations. Upadhyai et al., (2019) in their study entitled, "A Review of Healthcare Service Quality Dimensions and their Measurement" discussed to service quality has been a matter of concern for public and private healthcare institutions across the world. Increased focus on patient-centered care led to several researches in exploring what determines service quality and how can it be measured. It is concluded that dimensionality in the healthcare service quality is context specific and patients weigh them differently. Perceptions only measures dominate healthcare quality evaluation over gap score based models. Further, healthcare service quality construct and its measurement has been primarily done from the patients perspective, however, the providers perspective of the healthcare service quality has not been taken into consideration. Madan Gopal (2019) in his study entitled, "Strategies for ensuring quality health care in India: Experiences from the field", revealed that health care is one of India's most rapidly expanding sectors both in terms of revenue and employment. Improving the quality of health care is essential to meet the health-related targets and effective health planning requires a consideration of the WHO recommended key determinants, in which health care is simply an element. Besides, the health services, quality health needs interventions influencing other determinants of health such as culture, attitudes, income levels,

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nutritional status, hygiene and sanitation, lifestyle, social support, and among other things.

In the Union Budget 2019 it was said that over the last two decades, the use of health insurance has increased many folds in the country. India is a unique country where there are two parallel systems of healthcare delivery, private and state-owned and the number of users is huge in both. So the government is expected to look after expectations of both the systems. The facilities in top-notch private and government setups are same but the sheer load in government hospitals affects their efficiency badly. Hence majority of quality healthcare is being provided by the private sector. It's high time that the government considers this sector as an essential service provider and works for its betterment. According to Ali & Anwar, 2021, Customer satisfaction is the result by those that have experienced a hotel's performance that have satisfied their expectations. Many scholars proved the strong correlation between service quality and guest's satisfaction.

III. STATEMENT OF THE PROBLEM

Hospitals play an integral part in the health care system of a country. They perform various functions like in-patient, out-patient services, research and development, training and a host of other services. Indian hospitals can be categorized into public (Government), private and non- profit (Missionary/Trust owned) hospitals. Public hospitals are established, sponsored and administered by the public authority viz., the Government. The public hospitals are run by the Central and State Governments and missionary hospitals by charitable trusts which offer free services or at subsidized rates to the needy. Government hospitals consume a huge portion of the infrastructural facilities to provide free medical services to a mass of the population in the country. In public hospitals, both preventive and curative health care services are provided. The poor people prefer medical services from the Government hospitals because of their dire economic conditions. Hence, it need to analyse the services of Government Hospital like Emergency services, Ambulance services, Diagnostic services, Pharmacy services and Causality services. Customer Satisfaction level in these services are also examined in this study.

IV. OBJECTIVES OF THE STUDY

- 1. To analyse the socio economic profile of the patients of Government hospital in Tirunelveli District.
- 2. To examine the factors influencing the patients to select Government hospital in Tirunelveli District.
- 3. To identify the Customers level of Satisfaction in service Quality of Government hospital in Tirunelveli District.

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V. RESEARCH METHODOLOGY

The percent study analysis and evaluation of the research questions are carried out through the primary and secondary data. Primary data collected through direct interview schedule in government hospital in Tirunelveli District. The secondary data have been collected from the websites, newspapers and articles. Descriptive research is used for this study. 150 respondent selected for this study by using convenient sampling method. Statistical tools like Percentage analysis and Weighted Average are used for this study.

VI. DATA ANALYSIS AND INTERPRETATION

6.1 Socio economic profile of the patients

The present study confines the Socio economic profile of 150 respondents are gender, age, educational qualification, monthly income, occupation and Area of Residence. Parameters, frequency and their percentage of different variables are tabulated as under in table 1.

Table 1 Socio economic profile of the Respondents (Percentage Analysis)

S.No	Variables	Parameters	Frequency	Percentage (%)
		Male	85	56.67
1.	Gender	Female	65	43.33
		Total	150	100
		Below 20	18	12.00
2.	Age	21-30	24	16.00
		31-40	39	26.00
		41-50	41	27.33
		Above 50	28	18.67
		Total	150	100
3.	Education	Illiterate	17	11.33
		Primary level	46	30.67
		High school	54	36.00
		Graduate	29	19.33
		Post graduate & Profession	04	2.67
		Total	150	100
	Monthly Income	Up to 10000	47	31.33
		10000-20000	84	56.00
		20000-30000	14	9.33
4.		30000-40000	03	2.00
		Above 40000	02	01.34
		Total	150	100
		Agriculture	19	12.67
		Government Employee	10	06.67
		Private Employee	63	42.00
5.	Occupation	Business	28	18.67

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			Student	17	11.33
			House wife	13	8.66
			Total	150	100
			Rural	98	65.33
6.	Area	of	Urban	52	34.67
	Residence		Total	150	100

Sources: Computed from Primary Data

The above table-1 reveals that Male respondents (56.67%) are higher than Female respondents. Majority of the respondents are in the Age group of 41-50 (27.33%). Most of the respondents are High School Level (36%) as compared to other educational groups. Majority of the respondent's family monthly Income fall under Rs. 10,000–Rs. 20,000 (56%). Majority of the respondents are working as a private employee (42%). Majority of the respondent's Area of Residence is rural area (65.33%).

6.2 Factors influencing the patients to select Government hospital (Weighted Average Method)

Accessibility, free medicine, free treatment, Tangibility and Empathy are the major factors influencing the patients to select Government hospital. Table-2 Explains the Factors influencing the patients to select Government hospital.

Table-2 Factors influencing the patients to select Government hospital

S.No	Factors	Strongly Agree	Agree	No Opinion	Disagree	Strongly Disagree	Total	Mean/ Rank
1.	Free medicine	230 (46)	228 (57)	36 (12)	52 (26)	09 (09)	555 (150)	3.7 II
2.	Free treatment	290 (58)	224 (56)	18 (06)	38 (19)	11 (11)	581 (150)	3.87 I
3.	Accessibility	190 (38)	208 (52)	45 (15)	50 (25)	20 (20)	513 (150)	3.42 III
4.	Tangibility	180 (36)	196 (49)	60 (20)	48 (24)	21 (21)	505 (150)	3.37 IV
5.	Empathy	140 (28)	160 (40)	84 (28)	68 (34)	20 (20)	472 (150)	3.14 V

Sources: Computed from Primary Data

Table-2 revealed the Factors influencing the patients to select Government hospital in Tirunelveli district. Out of 150 respondents most of them select Government hospital for Free Treatment (Mean 3.87 and Rank-I), followed by, Free Medicine (Mean 3.70 and Rank-II) Accessibility (Mean 3.42 and Rank-III), Tangibility (Mean 3.37 and Rank-IV), Empathy (Mean 3.37 and Rank-IV), Empathy (Mean 3.37 and Rank-IV)

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6.3 Customers Level of Satisfaction in Service Quality of Government Hospital

Table -3 Shown the Customers level of satisfaction in 10 different Services of Government Hospital in Tirunelveli District.

Table-3 Customers Level of Satisfaction

Factors	Highly Satisfied	Satisfied	Moderate	Dis Satisfied	Highly	Total	Mean/ Rank
Emorgonov		120	E4			406	3.31
							3.31
							3.52
services	51	42				150	
Pharmacy	160	84	99	58	35	436	2.91
services	32	21	33	29	35	150	
Causality	180	108	66	68	31	453	3.02
services.	36	27	22	34	31	150	
Caring	210	144	48	60	26	488	3.25
G	42	36	16	30	26	150	
Willingness	230	116	60	62	24	492	3.28
to Service	46	29	20	31	24	150	
Kindness/	250	196	45	42	15	548	3.65
courtesy	50	49	15	21	15	150	
Availability	280	128	30	50	27	515	3.43
of Doctors	56	32	10	25	27	150	
	170	92	90	56	35	443	2.95
,	34	23	30	28		150	
•							
	205	108	78	68	22	481	3.21
				-			
	Emergency services Ambulance services Pharmacy services Causality services. Caring Willingness to Service Kindness/	Emergency services 48 Ambulance 255 services 51 Pharmacy 160 services 32 Causality 180 services. 36 Caring 210 42 Willingness to Service 46 Kindness/ 250 courtesy 50 Availability of Doctors 56 Availability of Special ward specialist services. Cleanliness/ 205 water/toilet 240	Satisfied	Satisfied Emergency services 240 128 54 services 48 32 18 Ambulance services 255 168 33 services 51 42 11 Pharmacy services 160 84 99 services 32 21 33 Causality services 180 108 66 services 36 27 22 Caring 210 144 48 42 36 16 Willingness to Service 46 29 20 Kindness/ courtesy 50 196 45 courtesy 50 49 15 Availability of Doctors 56 32 10 Availability of Special ward specialist services. 205 108 78 Cleanliness/ water/toilet 41 27 26	Emergency services 240 128 54 44 services 48 32 18 22 Ambulance services 51 42 11 26 Pharmacy services 160 84 99 58 services 32 21 33 29 Causality services 36 27 22 34 Caring services 36 27 22 34 Caring services 210 144 48 60 Willingness to Service 46 29 20 31 Kindness/ courtesy 50 196 45 42 courtesy 50 49 15 21 Availability of Doctors 56 32 10 25 Availability of Special ward specialist services. 205 108 78 68 Cleanliness/ water/toilet 41 27 26 34	Emergency services 240 128 54 44 30 Ambulance services 51 42 11 26 20 Pharmacy services 51 42 11 26 20 Pharmacy services 32 21 33 29 35 Causality services. 36 27 22 34 31 Caring services. 210 144 48 60 26 Willingness to Service 46 29 20 31 24 Kindness/ courtesy 50 49 15 21 15 Availability of Doctors 56 32 10 25 27 Availability of Special ward specialist services. 205 108 78 68 22 Cleanliness/ water/toilet 41 27 26 34 22	Satisfied Satisfied Dissatisfied Emergency services 48 32 18 22 30 150

Sources: Computed from Primary Data

VII. FINDINGS OF THE STUDY

- Majority of the respondents are Male and in the Age group of 41-50
- Most of the respondents are education in High School Level
- Majority of the respondents are working as a private employee
- Majority of the respondent's family monthly Income fall under Rs. 10,000–Rs. 20,000
- Majority of the respondent's Area of Residence is rural area
- Out of 150 respondents most of them select Government hospital for Free Treatment

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VIII. SUGGESTIONS

- Government hospital services should be enhanced in terms of quality of service and treatment, and doctors should be more attentive to patients and respond to them in a timely manner.
- The personnel, nurses, and midwives attend to the patients at the appropriate time and Location.
- The government should take steps to improve the quality of government hospitals as well as their infrastructure. And cleaning of the hospital ward in and around area.
- Patient feedback should be collected on a regular basis in order to determine which Areas need to be addressed in order to optimise customer satisfaction.
- A chart of a patient rights and responsibilities can be exhibited in the wards, even in The local language.

IX. CONCLUSION

Government hospitals played a key part in large and minor health problems, despite The fact that service is an intangible aspect that we cannot see or touch. The majority of People were satisfied with the free medical treatment, cost and free drugs, and service quality. Because today consumer expects the best price, solid infrastructure, technology Advancements and availability, best payment choices, and good service quality. In Government hospitals, half of the patients were dissatisfied due to a lack of doctors, facilities, and technological advancements.

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