

A Study on Quality of Government Hospital Services and Satisfaction of Patients

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Abstract

A study of service quality in government hospitals and patient satisfaction in Virudhunagar holds significant importance, particularly due to the critical role these institutions play a vital role in providing accessible and affordable healthcare services to a large section of the population. These hospitals serve people from both urban and rural areas, particularly those belonging to economically weaker sections of society. This study collects 100 data from the patients of government hospitals which are located in Virudhunagar district. This study simply analysed with two tools of mean rank and ANOVA test with the help of SERVQUAL dimensions. This study results that majority of patients are highly satisfied with the services offered by government hospitals in Virudhunagar district.

Keyword: Service quality, Patient satisfaction, Government hospitals.

1.Introduction

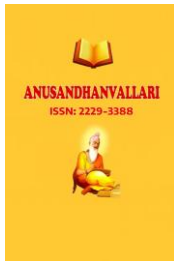
Today, we live in an economy which is service-oriented. Marketers offer tangible goods with supporting services such as pre-sale or after sale services, accompanying a product. But as a distinctive area of study in marketing, attention is paid to those services sold by business or professional concerns with profit seeking motives.

Service quality

Service quality refers to the degree to which healthcare services meet or exceed the expectations of patients. In the context of hospitals, service quality includes various aspects such as the availability of medical facilities, competence of doctors and nurses, promptness of service, cleanliness of the hospital environment, availability of medicines, and the manner in which patients are treated. High service quality is achieved when healthcare services are reliable, responsive, efficient, and patient-centered, leading to a positive healthcare experience for patients..

Patient satisfaction

Patient satisfaction is a component of healthcare quality and is increasingly being used to assess medical care in many countries in the world. Until recently, traditional assessments of medical care were done purely in terms of technical and physiological reports of outcomes (Jenkinson et al 2002). Patient satisfaction is the extent to which patients are pleased with the healthcare services they receive from a hospital. It reflects patients' perceptions, expectations, and experiences regarding medical treatment, staff behavior, hospital facilities, communication, waiting time, and overall care. Patient satisfaction is considered an important indicator of healthcare quality because satisfied patients are more likely to trust healthcare providers, follow medical advice,



and continue using the hospital's services. Higher levels of patient satisfaction generally indicate that the hospital is successfully meeting the needs and expectations of its patients.

Patient's Satisfaction in Hospitals

Health care scenario is fast changing all over the world. Patient satisfaction is one of the established yardsticks to measure success of the services being provided in the hospitals. Improved socio economic status and easier access to medical care has led to high expectations and demands from consumers of hospital services. For health care organization to be successful monitoring of customers' perception is a simple but important strategy to assess and improve their performance

Factors of Service Quality

The five key factors of service quality, commonly represented by the SERVQUAL model, play a critical role in determining patient satisfaction in healthcare settings, including government hospitals. SERVQUAL is a widely used service quality measurement model developed by A. Parasuraman, Valarie A. Zeithaml, and Leonard L. Berry. It is used to measure the gap between customers' expectations and their perceptions of the actual service received. In the healthcare sector, SERVQUAL helps assess the quality of services provided by hospitals and their impact on patient satisfaction. Here's a more detailed explanation of each:

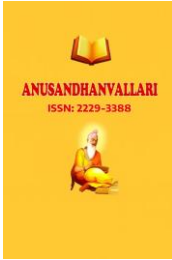
1.Reliability: This factor refers to the hospital's ability to consistently deliver the services it promises, ensuring that medical procedures, treatments, and diagnoses are conducted accurately and efficiently. Reliability refers to the hospital's ability to provide accurate and dependable services as promised.

2.Responsiveness: This measures the willingness and ability of hospital staff to assist patients and provide prompt service. It includes factors such as how quickly patients are attended to, how swiftly staff respond to emergencies, and how efficiently they handle patient inquiries or complaints. Responsiveness refers to the willingness of healthcare staff to help patients promptly and provide timely services. Responsiveness is crucial in a healthcare setting, where delays in service can significantly impact patient outcomes and satisfaction.

3.Assurance: This factor involves the knowledge, competence, and professionalism of healthcare providers, including doctors, nurses, and support staff. Assurance also encompasses their ability to inspire confidence and trust in patients. Assurance refers to the knowledge, competence, courtesy, and trustworthiness of healthcare professionals. For example, patients feel reassured when hospital staff display expertise, courtesy, and an understanding of their medical conditions, thus creating a sense of security.

4.Empathy: Empathy refers to the hospital's ability to provide caring, personalized attention to patients. It involves understanding individual patient needs, being compassionate, and offering emotional support. In a hospital setting, where patients often feel vulnerable, empathy from healthcare providers can significantly enhance their overall experience and satisfaction with the service.

5.Tangibility: This factor focuses on the physical aspects of the hospital, such as the appearance of the facilities, the quality of medical equipment, cleanliness, and the comfort of the environment. Tangibility refers to the physical appearance of hospital facilities, equipment, medical instruments, staff appearance, cleanliness, and infrastructure. Tangibles also include the appearance of hospital staff and how well-maintained the hospital infrastructure is. A clean, well-organized hospital with modern equipment can create a positive impression and contribute to the perception of high-quality care.



2. Review of Literature

Sharma, R. & Gupta, N. (2022) "Assessing Service Quality in Public Healthcare: A Study of Virudhunagar's Government Hospitals". The study showed that service quality in Virudhunagar's government hospitals is notably impacted by resource limitations and high patient volumes. Key areas of concern include long wait times, suboptimal cleanliness, and inconsistent staff connections. Improving patient satisfaction requires enhancing infrastructure, reducing waiting periods, and training staff to improve responsiveness and empathy. The study suggests that targeted interventions and better resource allocation could lead to notable improvements in patient care and overall satisfaction.

Patel, S. (2021), "Patient Satisfaction in Government Hospitals: A Case Study in Urban India". This research identified that patient dissatisfaction in government hospitals is primarily due to inadequate facilities, insufficient staff, and poor communication. Although these hospitals are accessible and affordable, the quality of service often falls short due to logistical and management issues. The study emphasizes the need for systemic reforms, including better infrastructure, enhanced staff training, and improved patient communication to boost satisfaction levels.

Deshmukh, P. & Jain, M. (2020) "Quality of Care and Patient Satisfaction in Virudhunagar's Government Hospitals". The study highlighted that while government hospitals in Virudhunagar provide essential services at low cost, patient satisfaction is hindered by issues such as overcrowding and outdated facilities. The research underscores the importance of upgrading medical equipment, improving cleanliness, and increasing staff numbers to address these challenges. Enhancing patient engagement and feedback mechanisms is also recommended to better understand and address patient needs.

Mehta, A. & Khan, R. (2019) "Evaluating Service Quality in Public Health Institutions: Insights from Virudhunagar". Findings indicate that service quality in public health institutions in Virudhunagar is often affected by bureaucratic inefficiencies and limited resources. Patients frequently report dissatisfaction with wait times, staff responsiveness, and overall hospital environment. Datta et al. (2024) The study advocates for streamlined administrative processes, better resource management, and training programs for healthcare providers to enhance service quality and patient satisfaction.

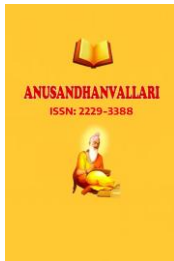
3. Objectives of the Study

1. To study the demographic profile of the respondents in government Hospitals in Virudhunagar
2. To identify the Service Quality dimensions of Government hospital services in Virudhunagar
3. To measure the influence of demographic variables on Service Quality dimensions and Patient Satisfaction.

4. Scope of the Study

The study focuses on evaluating the quality of services delivered by government hospitals and determining the level of patient satisfaction with these services. The scope includes various aspects of healthcare delivery such as:

- Availability of medical facilities and infrastructure.
- Accessibility and affordability of healthcare services.



- Competence and responsiveness of doctors, nurses, and supporting staff.
- Quality of diagnostic and laboratory services.
- Availability of medicines and treatment facilities.
- Cleanliness, hygiene, and safety measures within hospitals.
- Patient experiences during registration, consultation, treatment, and follow-up care.

5. Research Design

The study adopts a descriptive research design to understand patients' perceptions regarding service quality and satisfaction in government hospitals. The population consists of all patients who have received treatment from selected government hospitals during the study period. Individual patients visiting outpatient departments (OPD) and inpatient departments (IPD) of government hospitals. A convenience sampling method or simple random sampling method may be employed to select 100 respondents based on accessibility and willingness to participate.

Both primary and secondary data was used to collect the data for this study. A structured questionnaire were used in the study. The following tools Percentage Analysis, Mean and Standard Deviation, Chi-Square Test were used in this study.

6. Hypotheses of the Study

1. There is no significant influence of gender in factors of service quality perception.
2. There is no significant influence of Education qualification in factors of service quality perception.

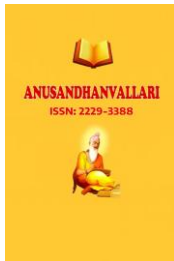
7. Analysis

Gender and educational qualification plays a vital role for assessing service quality of the respondents. So in this research this two demographic variables are analysed using ANOVA.

7.1 Influence of Gender in factors of service quality perception

The perceptual difference between male and female patients over service quality dimensions is clearly presented in the following ANOVA table:-

Variables		Sum of Squares	Of	Mean Square	F	Sig.
Tangibility	Between Groups	7.477	4	1.717	1.725	.177
	Within Groups	92.533	96	.995		
	Total	100.000	100			



Reliability	Between Groups	3.299	4	.922	.921	.512
	Within Groups	96.701	96	1.001		
	Total	100.000	100			
Responsiveness	Between Groups	1.902	4	.477	.474	.755
	Within Groups	98.098	96	1.004		
	Total	100.000	100			
Assurance	Between Groups	4.017	4	1.004	1.004	.405
	Within Groups	95.983	96	1.000		
	Total	100.000	100			
Empathy	Between Groups	2.755	4	.799	.797	.701
	Within Groups	97.245	96	1.002		
	Total	100.000	100			

From the above table, it is noticed that all the F values are statistically insignificant at 5% level. This implies that the patient's ages do not differ in their perception towards service quality dimensions.

7.2 Influence of Educational Qualifications in factors of service quality perception

The perceptual difference among the patients with school level education, under graduation, post graduation and professionals are clearly presented in the ANOVA table below:-

Variables		Sum of Squares	of	Mean Square	F	Sig.
Tangibility	Between Groups	6.477	4	1.236	1.218	.228
	Within Groups	93.533	96	.978		
	Total	100.000	100			
Reliability	Between Groups	11.299	4	.324	.318	.830
	Within Groups	88.701	96	1.105		
	Total	100.000	100			

Responsiveness	Between Groups	10.902	4	5.219	5.304	.000
	Within Groups	81.098	96	.964		
	Total	100.000	100			
Assurance	Between Groups	4.016	4	.519	.502	.721
	Within Groups	95.984	96	1.104		
	Total	100.000	100			
Empathy	Between Groups	12.755	4	1.239	1.404	.208
	Within Groups	87.245	96	.937		
	Total	100.000	100			

From the above table, it is determined that Tangibles ($F=5.304$, $P=.000$, $P=.502$) are statistically significant at 5% level. This leads to the mean comparison as stated in the descriptive statistics. It is found that the patients with School level qualifications strongly agree for Tangibles than other educational groups.

7.3 Quality of service in Government Hospitals

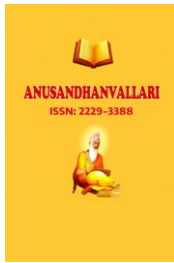
Table 4. Quality of service in Government Hospitals

Variables	In No's	In %
Excellent	30	30
Very good	15	15
Good	20	20
Average	25	25
Very poor	10	10
Total	100	100

Majority of the respondents are satisfied with the services offered by government hospitals

Table 3. Scores of SERVQUAL Dimensions

Varibales	N	Mean	S.D	Mean Rank
Tangibility	100	68.75	16.152	2.17
Reliability	100	73.28	16.324	3.12
Responsiveness	100	68.32	14.101	2.85
Assurance	100	74.51	16.513	3.95
Empathy	100	63.53	14.525	2.01



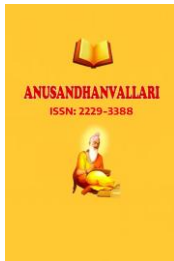
Test Statistics N 100 Chi-Square 47.168 df 4 P-value .000 The above results indicate that calculated p-value is 0.000. It is less than 0.05. Therefore Friedman test is rejected. Hence Null hypothesis is rejected and Alternate hypothesis is accepted. Conclusion: There is a significant relationship in factors of service quality of government hospitals. This suggests that empathy is viewed as the least satisfactory dimension of service quality among patients.

8. Limitations of the Study

1. The study is confined only to selected government hospitals and therefore may not represent all government hospitals.
2. The sample size of 100 respondents may limit the generalization of findings.
3. Patient responses are based on personal perceptions and experiences, which may vary from individual to individual.
4. Time constraints restricted the collection of data from a larger number of respondents.

9. Findings of the Study

1. It is found that 51.5% are male patients and 48.5% are female patients. Further 53.3% patients are from the age group of 21 to 34 years; and only 5.3% represent the age group of above 55 years.
2. It is found 32.2% of patients are having under graduation and only 3.8% are studied upto professional level. Further 55.8% of the patients are unmarried and 44.2% of the patients are married.
3. It is found 44.2% of patients are having 3 to 4 dependents; and 4.3% are having more than 6 dependents.
4. 33.7% of the Patients are working in Private Sector and 9.1% of Patients are working in Public Sector.
5. It is found 44.2% of the Patients are earning an annual income of upto Rs. 1, 00,000 and only 4.4% Patients are earning above Rs. 6,00,000.
6. 61.1% of Patients are in treatment of one to 4 years; and only 3.3% of Patients are in treatment of above 12 years.
7. It is found 50.7% of Patients are living in Urban area; and 49.3% of the Patients are living in Rural area.
8. 54.8% of the Patients are taken treatment in 2 to 3 times and only 4.9% of Patients are taken treatment in 4 to 5 times before admitted in hospitals
9. It is found 27.2% of Patients are having regular checkup in hospitals Monthly; and only 6.3% of the Patients are having regular checkup in hospitals Daily.
10. 51.7% of the Patients are admitted in hospitals one time; and only 6.5% of the Patients are admitted in hospitals above 4 times.
11. It is found 24.64% patients are quality seekers. They strongly disagree for confidence building, assurance, empathy, courtesy, responsiveness, communication and reliability; and moderately agree for Tangibles.
12. It is found 27.20% patients are acceptable patients. They moderately agree for Confidence Building, Assurance, Empathy, Responsiveness, Communication, and Reliability; and strongly disagree for Courtesy.
13. It is found 50.15% patients are quality oriented patients. They strongly agree for Confidence Building, Assurance, Tangibles, Courtesy, Empathy, Responsiveness, Communication, and Reliability.
14. There is an association between service quality perception of patients and their age. It implies that 21-34 years aged patients have perceived the service quality dimensions in different manner.



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15. There is no association between service quality perception of patients and their educational qualifications. It is found that 34.6% Quality oriented patients are found to be Under Graduate Educational qualifications.

10. Suggestions

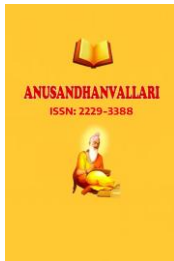
1. Most patients prefer government hospitals because of affordable and low-cost healthcare services.
2. A majority of respondents are generally satisfied with the medical treatment provided by doctors.
3. Patients appreciate the availability of essential healthcare services and government health schemes.
4. Long waiting times for registration, consultation, and diagnostic services remain a major concern.
5. The behaviour and responsiveness of healthcare staff significantly influence patient satisfaction levels.
6. Cleanliness and sanitation facilities have improved but still require further enhancement in some hospitals.
7. Availability of medicines positively affects patient satisfaction.
8. Infrastructure and hospital facilities play an important role in shaping patients' perceptions of service quality.
9. Effective communication between healthcare providers and patients increases patient confidence and satisfaction.
10. A positive relationship exists between service quality and patient satisfaction, indicating that improvements in service quality lead to higher levels of patient satisfaction.

11. Conclusion

Healthcare service quality strongly and significantly influences patient loyalty in the Asir region. Enhancing responsiveness, empathy, and assurance should be prioritized to strengthen patient trust and retention. Improving service quality is essential for building a sustainable, patient-centered healthcare system. The study revealed a good level of patient satisfaction with the services rendered by government teaching hospital. Evaluation of patient satisfaction in this study serves as baseline data and to understand the area of lacunae for improving the quality of services which can improve clinical and functional outcomes.

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