



An Empirical Study to Evaluate the Patient Satisfaction in Terms of Services Delivered in Private Hospitals Chennai

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Abstract

Case expectation in health care continues to increase and this is commodity that needs to be managed adequately in order to meliorate issues and drop liability. Understanding cases' prospects can enhance their satisfaction position. This paper discusses cases prospects and proposes performance of rudiments of case-centered care and value- predicated care into our being health care systems moment.

Need Of The Study: The study covers the patient anticipation in a sanitarium for a better service and managing time. This study also helps in reducing the overall time in the inpatient department

Research Design: The study used an exploratory exploration system, in which 1000 actors were named, and used a arbitrary fashion.

Limitations: Although this exploration was precisely prepared, still there are certain limitations and failings. This study was done only for the private hospitals in Chennai.

Findings: Grounded on the analysis and interpretation H1, H2, and H4 are accepted while H3 is rejected.

H1. The better the croaker services (DS), the advanced the case satisfaction.

H2. The better the nanny's services (NS), the advanced the case satisfaction.

H3. The easier the enrollment and executive procedures, the advanced the case satisfaction.

H4. The shorter the waiting time, the advanced the case satisfaction.

Keywords: Outpatient department, technology, patient satisfaction

INTRODUCTION

Patient/ Case satisfaction (PS) could be described as a station deduced by a receiver of services as to whether a case's comprehensions (prospects) for services have been fulfilled or not. The current views on the quality of service delivery feel to point out that medical care fulfills public expectation and requirements, both in respects to interpersonal care and specialized care.

Case satisfaction was delved for several purposes in the healthcare delivery sector. First, it had to be decided what and how the extent of satisfaction impacts cases seeking services, fulfilling drug conditions, and their ongoing operation of these services.

Satisfaction is used as an index of the service delivery quality as well as to help croakers and the health service institutions to make a better

understanding of the cases' feedback and to use these points of view to ameliorate responsibility and the installations that are handed. The most important recipients of a better healthcare system are obviously the patients and patients are of prime focus of any medical service delivery setup

1.1. STATEMENT OF THE PROBLEM

This study aimed to assess how doctor services, nurses' services, and waiting time predict patient satisfaction (PS) with the service delivery of healthcare in Chennai

1.2. OBJECTIVE

- To study the relationship between physicians and patients involves considerable handling, which has a significant influence on the patient satisfaction level

- To study the interaction between patient outcomes and nurse's services.
- To study the gap between the registration and administrative procedures.
- To reduce the waiting time in the outpatient department.
- To study the length of time the patients spend in hospitals to receive health services

1.3. RESEARCH METHODOLOGY

A. Area of research

Area of the research is the outpatient department. To reduce the overall waiting time in the outpatient department is studied in this research.

B. Sources of data

The data is collected through questionnaires and through observation.

C. Sampling Techniques

The sampling technique used here is the probability method. From the probability method the simple random method is chosen.

METHODS

- The samples are collected by the probability method through simple random samples.

- The questionnaires are given to the patients and attenders in the outpatient department.

D. Sample Size

The total samples taken for the research are 1000.

E. Scaling Technique

The scaling technique used is the non-comparative scaling. Itemized rating scale is used in which the odd/even scale is used.

F. Statistical Tools

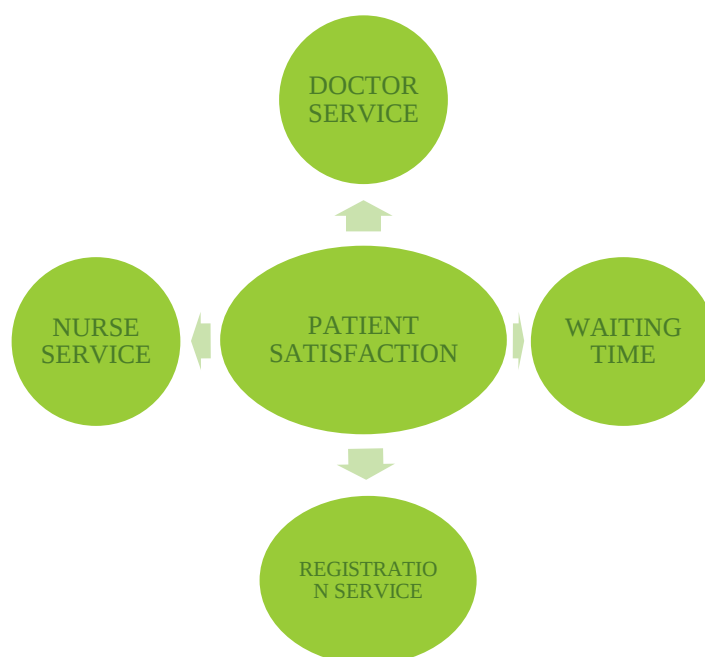
The tools used are the following

- Multiple Regression
- Percentage analysis
- Correlation

Hypothesis

The following are used in the research

1. The better the doctor services (DS), the higher the patient satisfaction.
2. The better the nurse's services (NS), the higher the patient satisfaction.
3. The easier the registration and administrative procedures, the higher the patient satisfaction.
4. The shorter the waiting time, the higher the patient satisfaction.



METHODS

The questionnaire for the present study contained five factors. It consisted of 22 questions.

TABLE 1 Demographic characteristics.

Characteristics	Number	%
Gender		

Male	431	43.1
Female	569	56.9
Age		
Less than 20	81	8.1
20-29	119	11.9
30-39	209	20.9
40-49	309	30.9
50 and above	282	28.2
Marital status		
Married	546	54.6
Single	423	42.3
Divorced	26	2.6
Widow	5	0.5

RESULT

To evaluate the authenticity of all items that were studied, a valid internal reliability

analysis was performed using SPSS. This analysis was employed to test whether these instruments provided consistency with the results. In this regard, the most commonly used technique is Cronbach's α reliability. The results of the present study demonstrated all α reliability coefficients (patient satisfaction = 0.97, doctor services = 0.94, registration services = 0.94, and waiting time = 0.77), which are greater than the value of 0.70. The means, standard deviations (SD), and correlations among all the variables and α reliabilities are illustrated in Table 2.

Table 2. Descriptive statistics, and correlations among variables.

VARIABLE	MEAN	SD	1	2	3	4	5
Patient satisfaction	4.01	0.62	-	-	-	-	-
Doctor service	3.55	0.76	0.460	-	-	-	-
Pharmacy	4.13	0.67	0.474	0.343	-	-	-
Registration process	2.23	0.79	0.219	0.208	0.223	-	-
Waiting time	2.85	0.82	0.258	0.263	0.17	0.275	-

SD=Standard Deviation; correlation is significant at the 0.01 level(2 tailed test)

The factor of patient satisfaction and other factors were computed by combining all three variables in SPSS. The factors were computed by mean centering the items. Mean centering of all factors was done before running the interactional terms in the regression analysis. This process reduced multicollinearity between an interaction term and its corresponding main effects. It may have also facilitated the interpretation of regression coefficients for the interaction terms.

Table 3. Multiple regression models (dependent variable: Patient satisfaction).

FACTOR	TOLERANCE	INFLATION FACTOR
DOCTOR SERVICES	0.673	1.485
NURSES SERVICES	0.713	1.402
REGISTRATION	0.807	1.238
WAITING TIME	0.820	1.219

The range of VIF was 1.238–1.511 which showed that multicollinearity does not exist in data. It was also found that β value of doctor services ($\beta = 0.232$; $t = 6.604$; $p < 0.05$) showed that one unit increased in it resulted by a 0.232 unit increase with patient satisfaction, nurses services ($\beta = 0.256$; $t = 7.500$; $p < 0.05$) revealed that one unit increased in nurses

services resulted in a 0.256 unit increase in patient satisfaction, and waiting time ($\beta = 0.091$; $t = 2.884$; $p < 0.05$) showed that increasing one unit in waiting time led to the decrease of 0.091 units in patient satisfaction. On the other hand, one factor was insignificant ($\beta = 0.028$; $t = 0.861$; $p = 0.390$). Based on these results, H1, H2, and H4 are accepted while H3 is rejected.

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DISCUSSIONS

Findings confirmed that hat services provided by doctors and nurses emerged to be significant factors that influence patient satisfaction with healthcare service delivery. Patients were also facing problems in doctor–patient relation due to less time for consultation, physical examination, discussion about health, and use of medicine. Nurse's services are the backbone of any healthcare system and a key determinant of patient satisfaction. In our results, we found that nurses services were a significant predictor of patient satisfaction. Since effective services are linked to the satisfaction, therefore, the administration tries to provide services in an efficient way. Our results revealed that registration services had an insignificant

impact on patient satisfaction. Even the mean value of registration services was 2.23, which, in other words, provided the possibility of the existence of positive registration services between patients and the facilitator.

IMPLICATIONS

Basic health is the primary need of every human. Our proposed research has the potential to help governments, concerning authorities and hospital administrations, to get rid of the increasing problems in health services. According to the increasing popular-tion and patients' demands, the doctors and professional nurses should be employed to facilitate patient satisfaction. The staff should be well-trained to interact carefully with the patients.

Furthermore, the registration and adminis-trative system should be easier and less time consuming for patients. The hospital administration should focus on features such as courteous staff, queries handling at the reception counter, cooperative behavior of registration staff, and an efficient system of addressing the complaints. Our research findings thus present appropriate and related knowledge about healthcare administration that continuously provide skilled doctors and nurses with professionally pleasant handling of patients that could satisfy them and gain their loyalty. The administration can learn to provide a cooperative environment by increasing the number of doctors and nurses to decrease the waiting time of patients for obtaining services, which could also contribute towards ultimate patient satisfaction.

CONCLUSIONS

An attempt was made to evaluate the patient satisfaction level by studying the various parameters of the service delivery of OPD in district-level hospitals, which offered us specific factors that need corrective measures to enhance the further service delivery of the hospitals. The present study concludes that improving examination and consultation quality of service delivery and the information provided to the patient in the examination process, establishing or improving an internet or telephone appointment system to decrease

waiting times, coordination between doctors, nurses and the outpatient department management, offering incentives for on-time doctors, generating value for the patient, and improving the doctors, nurses space of the wards can be effective strategies for the management of hospitals to increase patient satisfaction. Registration procedures should be easier in OPD so that PS could be enhanced.

CONFLICTS OF INTEREST: The authors declare no conflicts of interest.

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