

# A Study on Patient Satisfaction with Special Reference to Specific Hospital in Thanjavur

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**Abstract:** This paper presents a study on patient satisfaction with special reference to specific hospital in Thanjavur.

**Keywords:** Patient Satisfaction

## 1. Introduction

Patient satisfaction is a highly desirable outcome of clinical care in the hospital and may even be an element of health status itself. A patient's expression of satisfaction or dissatisfaction is a judgment on the quality of hospital care in all of its aspects. Whatever its strengths and limitations, patient satisfaction is an indicator that should be indispensable to the assessment of the quality of care in hospitals.

The word "hospital" comes from the Latin for both "guest" and "host," and the true spirit of hospitality is at the core of the hospital experience. The original mission of hospitals was to serve as houses of mercy, refuge, and dying for pilgrims returning from the Holy Land at the time of the late Christian antiquity. The striving to please patients is in harmony with the service calling of medicine and is certainly the right thing to do.

Before attempting to evaluate patient satisfaction, we need to know what it is. How we define patient satisfaction will help us structure an evaluation process that provides adequate measurements of the variables that contribute to a patients' level of satisfaction.

Although most patients are generally satisfied with their service experience, they may not be uniformly satisfied with all aspects of the care they receive. Therein lays the challenge to management—how much service is enough to elicit high satisfaction and keep them coming back

A patient's experience within a hospital environment is based on numerous encounters with a wide variety of individuals and locations. The first encounter is with the facility's parking lot, followed by physically accessing the facility, the admissions process, encounters with physicians, nurses, lab personnel, and other service providers and their respective physical locations, including patient rooms and the care they receive while in their room, the discharge process, and finally the billing/payment process. There are any number of factors that could impact on the patient's perception of the care provided throughout an inpatient stay.

Factors may include the cleanliness of the environment, the

appearance of the facility, the ease of access to specific locations, the concern expressed from various staff and providers for the patient's well-being, the amount of time they had to wait before getting care, the quality of the interaction with providers, the clarity of the communication from 5 providers, the outcome from the care provided, the cost of the visit, the quality of the food, the perceived efficiency in which care was delivered, and on and on.

## 2. Review of literature

Stump, T., Dexter, P., Tierney, W., and Wolinsky, F. (2010). Measuring Patient Satisfaction with Physicians among Older and Diseased Adults in a Primary Care Municipal Outpatient Setting: An Examination of Three Instruments. *Medical Care*; 33(9): 958-972.

The Physician Satisfaction Questionnaire (PSQ), the American Board of Internal Medicine (ABIM) questionnaire, and the Medical Outcomes Study (MOS) were administered to sanokes if older, diseased adults. By utilizing a crosswalk design and factor analysis, the seven-item MOS and the ten-item ABIM were selected for administration in a random control trial (n=1050). Findings suggested that a 5, 7 or 9 item version of the MOS was best at capturing visit-specific satisfaction, while the 10-item ABIM was best as a global satisfaction measure. The researchers had three suggestions for those who are going to study patient satisfaction:

Harris, L., Swindle, R., Mungai, S., Weinberger, M., and Tierney, W. (2011). Measuring Patient Satisfaction for Quality Improvement. *Medical Care*; 37: 1207-1213.

Developing an office-level, patient-focused quality improvement instrument involved mailing the 9-item Visit-Specific Questionnaire (VSQ) from the Medical Outcomes Study (MOS); the 12-item American Board of Internal Medicine Patient Satisfaction Questionnaire (with some modifications); and other questions created by their Quality Improvement Committee. Three satisfaction subscales were identified—provider, office and access—and were substantiated for both adults and children, utilizing factor analysis.

Munro, B., Jacobsen, B., and Brooten, D. (2012). Re-examination of the Psychometric Characteristics of the La Monica-Oberst Patient Satisfaction Scale. *Research in Nursing*

and Health; 17(2): 119-125.

Secondary analyses were used to assess the psychometric characteristics of the LaMonica-Oberst Patient Satisfaction Scale in a new, no oncologic (unplanned cesarean births, childbearing diabetics, and women who had hysterectomies) sample. This scale, originally constructed as a modification of the Patient Satisfaction Instrument, was designed to retain the dimensions of the original scale (“technical-professional, trusting relationship, and education relationship”) while reflecting the expected acute care nursing behaviors from an oncologic population. Thirteen (of the 41) items were dropped, and two factors were identified: dissatisfaction, and interpersonal support/good impressions. The authors believed that the overall results indicated the scale’s utility for no oncologic patients.

Williams, B. (2017). Patient Satisfaction: A Valid Concept? *Social Science and Medicine*, 38: 509-516.

This paper questions the concept of patient satisfaction as a coherent and unitary concept. The author begins his critique by reviewing the reasons that the concept has been introduced into the study of quality of care. Like Calnan (1988), he observes that patient satisfaction is associated with improved compliance and health outcomes; in addition, it reflects the larger consumer movement and a desire for accountability among health care providers. Finally, it is being used increasingly to gauge efficiency. However, the author argues that despite these current usages, the concept and measures of it have several hidden or implicit assumptions that bear further examination. First, it is assumed that satisfaction is the result of some prior process, however what that process is unclear; tests of theoretical explanations of these processes reveal limited support for the model (see Linder-Pelz).

Kravits, R. (2017). Patient Satisfaction with Health Care: Critical Outcome or Trivial Pursuit? *Journal of General Internal Medicine*; 13: 280 – 282.

The author begins by asserting that based on the increasing number of times the term patient satisfaction has appeared in Medline between 1975 and 1997 measuring patient satisfaction “has become a major industry.” However, the author queries: is patient satisfaction a concept worth measuring, what is the best way to measure it and how are the results to be used? The author couches the answer to first question in terms of a division between those who care about consumer opinion and client-centered care and those who believe attention and resources are best devoted to other issues such as over- and underutilization and health outcomes. However, the author observes that helping patients’ to achieve their health-related goals is a fundamental aim of medicine. Further, the only way to gauge these goals is by asking patients. The question, however, of whether patient satisfaction can be reliably and meaningfully measured remains. The author argues that those measuring patient satisfaction must be clear that patient satisfaction is not a single, unitary concept but “a distillation of” perceptions (beliefs about occurrences) and values (the relative import of the

occurrences). The author argues that the inability of some patient satisfaction measure items (e.g., how satisfied were you with the amount of time the doctor spent with you today) to distinguish perceptions from values. Additionally, in addressing the purpose of measuring patient satisfaction, the author describes the need to distinguish between using patient satisfaction measures as report cards or for quality improvement purposes. In the latter case, using them as independent predictors of patient satisfaction reveals meaningful areas for improvement, while in the former controlling for background characteristics is appropriate. Finally, the author addresses the issue of how to use patient satisfaction measures and concludes that the “important question is whether they can stimulate genuine gains in patient-centered care.”

### 3. Research methodology

Research in common parlance refers to a search for knowledge. One can also define research as a scientific and systematic search for pertinent information on a specific topic. In fact, research is an art of scientific investigation. The advance learner’s dictionary of current English lists down the meaning of research as “There careful investigation or enquiry specially through search for new facts in any branch of knowledge.” Red man and Mory define research has a “systemized effort to gain new knowledge. “Some people consider research has a movement, a movement from the known to the knowledge. It is actually a voyage of discovery. We all possess the vital instinct inquisitiveness for, when the knowledge comfort has, we wonder and our inquisitiveness makes of probe and attain full and fuller understanding of the knowledge. This inquisitiveness is the mother of all knowledge and the method, which man employs for obtaining the knowledge of whatever the unknown, can be termed as research.

#### A. Statements of the Problem

Hospital is service oriented but now a day all the hospitals are business oriented. So the service is not full fill to all hospitals. The patients are not satisfied in service, surgery, hospitality in all time. Some hospitals are only giving best in service. The hospital staffs are given service is sometimes only best. Then the hospitality is also not satisfying to the patient.

#### B. Objectives of the study

- To study the comparative hospital service facilities provided by Meenakshi hospital and Rohini hospital
- To study the level of satisfaction of the patient with Meenakshi hospital and Rohini hospital
- To understand the utilization of hospital facilities in Meenakshi hospital and Rohini hospital
- To identify the problem faced by the Rohini hospital and Meenakshi hospital
- To provide suitable suggestion for effective implement of the hospital services

### C. Hypotheses

Keeping in view of the objectives of the study the presents study shall framed following hypotheses and relevant tools has been used to test the hypotheses.

There is no significant relationship between income of the respondent & patient satisfaction.

### D. Data collection methods

The Data required for the study are collected from both primary & secondary sources. Primary data's are collected through structured questionnaire and secondary data's are collected from official website of the company, textbooks, journals, articles etc.

### E. Interview schedule

Interview schedule has been used to collected data & information from the Meenakshi hospital and Rohini hospital.

### F. Questionnaire design

Presented question has been framed & pretested finalized the question to collect the information from the patient (Respondent).

Questionnaire used for data collection is designed based on the fulfillment of the objectives of the study. The Questionnaire contains demographic and socioeconomic profile of the respondents, various attributes & factors related to patient satisfaction was used in the questioner.

### G. Scope of the study

I am studying MBA, So I do this project based on patient satisfaction. I have an interested in hospital management. The study of analysis of the best service in the specific hospital. Find out the analysis of which hospital can be satisfied to the patient in all ways.

### H. Period of research

The study is conducted from Dec 2018 to Apr 2019. The total Duration of the study is 5months.

### I. Sampling techniques

The sample size for the study was selected on the basis of simple random sampling method. Totally 100 respondents in which 50 respondents are taken treatment from Meenakshi hospital another 50 respondents are taken treatment from Rohini hospital.

### J. Research design

A Research design is purely and simply the framework or plan for a study that guides the collection and analysis of data. In fact, the research design is the conceptual structure within which research is conducted; it constitutes the blueprint for the collection, measurement and analysis of data.

- Type of Research
- Title of research
- Area of research
- Period of research

- Sampling techniques
- Data collection methods
- Tools used for analysis
- Problem Statement
- Limitations on the study

### K. Type of research

The research is descriptive in nature. It includes surveys and fact finding enquiries of different kinds. The major purpose of descriptive research is description of the state of affairs as it exists at present.

### L. Title of the research

A study on patient satisfaction with special reference to specific hospital in Thanjavur.

### M. Area of research

The study is conducted in Thanjavur District.

### N. Tools used for analysis

The following statistical tools are used for data analysis

- Percentage
- Averages
- Chi-Square Analysis
- ANOVA
- Correlation

### O. Limitation of the study

- Data collected may have biased response
- All the details of the project are only suitable for patient satisfaction in Thanjavur. Not suitable for others.
- This research result (finding and suggestions) is applicable only to the specific hospital.

### P. Chi-Square test

Relationship between Genders and how satisfied are you with the comfort of your room & facility in Meenakshi hospital.

#### Hypothesis

*Null hypothesis:* there is no significant relationship between Genders and how satisfied are you with the comfort of your room & facility in Meenakshi hospital

Calculated value  $\chi^2 = 1.767439$

Degree of freedom  $= (R-1)(C-1) = (2-1)(5-1) = 4$

The table value of  $\chi^2$  for 4 degree of freedom at 5 percent level of significance is 9.49

*Conclusion:* Calculated value of chi square is less than value, so the null hypothesis is accepted. Hence it is concluded that there is no significant relationship between Genders and how satisfied are you with the comfort of your room & facility in Meenakshi hospital.

#### Hypothesis

*Null hypothesis:* There is no significant relationship between Questions & worries and satisfaction on treatment.

Table 1

Relationship between Genders and how satisfied are you with the comfort of your room & facility in Meenakshi hospital.

Gender	How satisfied are you with the comfort of your room & facility in Meenakshi hospital					Total
	Highly satisfied	Satisfied	Neutral	Dissatisfied	Highly dissatisfaction	
Male	14	20	04	0	0	38
Female	02	08	02	0	0	12
Total	16	28	06	0	0	50

Table 2  
Observed and Expected frequency

Observed frequency	Expected frequency	O-E	(O-E) <sup>2</sup>	(O-E) <sup>2</sup> /E
14	12.16	1.84	3.3856	0.278421
20	21.28	-1.28	1.6384	0.076992
4	4.56	-0.56	0.3136	0.068772
0	0	0	0	0
0	0	0	0	0
2	3.84	-1.84	3.3856	0.881667
8	6.72	1.28	1.6384	0.24381
2	1.44	0.56	0.3136	0.217778
0	0	0	0	0
0	0	0	0	0
X <sup>2</sup>				1.767439

Table 3  
Anova for meenakshi hospital

Questions and worries		Satisfaction on treatment	
Very good	10	Strongly agree	06
Good	38	Agree	38
Neutral	02	Neutral	06
Poor	0	Disagree	0
Very poor	0	Strongly disagree	0
Total	50	Total	50

Anova: Single Factor				
SUMMARY				
Groups	Count	Sum	Average	Variance
Column 1	50	92	1.84	0.218776
Column 2	50	100	2	0.244898

ANOVA						
Source of Variation	SS	Df	MS	F	P-value	F crit
Between Groups	0.64	1	0.64	2.760563	0.09981	3.938111
Within Groups	22.72	98	0.231837			
Total	23.36	99				

**Conclusion:** Calculated F value is 2.760 and F critical value is 3.938 so calculated value is less than a table value, so the null hypothesis is accepted. Hence it is concluded that there is no significant relationship between Questions & worries and satisfaction on treatment.

**Hypothesis:**

**Null hypothesis:** There is no significant relationship between satisfaction on treatment and hospital staffs treat you.

**Conclusion:** Calculated value is 0.299, so I concluded it with satisfaction on treatment and hospital staffs treat you are positively correlated.

Table 4  
Correlation for Meenakshi hospital

Satisfaction on treatment		Hospital staffs treat you	
Strongly agree	06	Very good	18
Agree	38	Good	30
Neutral	06	Neutral	02
Disagree	0	Poor	0
Strongly disagree	0	Very poor	0
Total	50	Total	50

	Column 1	Column 2
Column 1	1	
Column 2	0.299342	1

Table 5  
Comparison the Satisfaction about bough hospital

Scaling	Rohini hospital		Meenakshi hospital	
	Respondent	Percentage	Respondent	Percentage
Highly satisfied	02	4	08	16
Satisfied	20	40	36	72
Neutral	18	36	06	12
Dissatisfied	10	20	0	0
Highly dissatisfaction	0	0	0	0
Total	50	100	50	100

Table 6  
Comparison the Treatment about bough hospital

Scaling	Rohini hospital		Meenakshi hospital	
	Respondent	Percentage	Respondent	Percentage
Strongly agree	0	0	06	12
Agree	22	44	38	76
Neutral	04	08	06	12
Disagree	12	24	0	0
Strongly disagree	0	0	0	0
Total	50	100	50	100

*Conclusion:* Based on the feeling about the respondents Meenakshi hospital respondents are feeling good with satisfaction then the Rohini hospital patients.

Table 7  
Comparison the payment about bough hospital

Scaling	Rohini hospital		Meenakshi hospital	
	Respondent	Percentage	Respondent	Percentage
Highly satisfied	02	04	04	08
Satisfied	20	40	14	28
Neutral	24	48	22	44
Dissatisfied	02	04	10	20
Highly dissatisfied	02	04	0	0
Total	50	100	50	100

*Conclusion:* Based on the feeling about the respondent Meenakshi hospital respondents are feeling good with Treatment then the Rohini hospital patients.

*Conclusion:* Based on the feeling about the respondent Rohini hospital respondents are feeling good with payment then the Meenakshi hospital patients.

Table 8  
Comparison the surgery about bough hospital

Scaling	Rohini hospital		Meenakshi hospital	
	Respondent	Percentage	Respondent	Percentage
Highly satisfied	04	08	08	16
Satisfied	20	40	32	64
Neutral	22	44	10	20
Dissatisfied	02	04	0	0
Highly dissatisfied	02	04	0	0
Total	50	100	50	100

*Conclusion:* Based on the feeling about the respondent Meenakshi hospital respondents are feeling good with payment then the Rohini hospital patients.

#### 4. Findings

The study is conducted to know the patient satisfaction of Thanjavur hospital. A detailed survey is conducted among 50 respondent collected from Rohini hospital & another 50 respondent collected from Meenakshi hospital and following are the findings from the study.

#### A. Socio-economic and demographic profile of the respondents from Meenakshi hospital

- Majority of the patients selected as sample are in 21-30 years age group.
- Majority of the respondent are Male.
- Majority of the respondents are Unmarried.
- Majority of the respondents are coming from rural area.
- Majority of the respondent monthly income is 25,000 to 50,000.

#### B. Respondents perception about work life balance

- Most of the respondents feeling are good in questions and worries are answered by Meenakshi hospital.
- Most of the respondents are selected agree about the treatment given by Meenakshi hospital.
- Most of the respondents feeling good in experience with Meenakshi hospital staffs.
- Most of the respondents are satisfied rating with Meenakshi hospital.
- Most of the respondents says very good waiting area in Meenakshi hospital.
- Most of the respondents are satisfied with Meenakshi hospital.
- Most of the respondents are satisfied about the comfort on room & facility in Meenakshi hospital.
- Most of the respondents are feeling satisfied about there needs are being met in Meenakshi hospital.
- Most of the respondents are satisfied with the care provided by Meenakshi hospital.
- Most of the respondents are satisfied with the Meenakshi hospital schedule.
- Most of the respondents are satisfied with pain management program.
- Most of the respondent are select good about Meenakshi hospital staff treat patients.
- Most of the respondents feel satisfied with the licensed nursing staff.
- Most of the respondents are satisfied about clean and safety environment in Meenakshi hospital.
- Most of the respondents are select neutral about satisfaction towards hospital all time.
- Most of the respondents feel satisfied on keeping personal information confidential.
- Most of the respondents are saying yes, for recommend this service to all.
- Most of the respondents are coming by the way of referred by doctors.
- Most of the respondents are satisfied in surgery.
- Most of the respondents feel satisfied about the Meenakshi hospital staff treat patients in emergency time.



- Most of the respondents feeling satisfied about the doctors are continue checkup in after discharging patients.
- Most of the patients feel neutral about the transportation facilities in Meenakshi hospital.
- Most of the respondents are feel neutral in payments.

#### *C. Socio-economic and demographic profile of the respondents from Rohini hospital*

- Majority of the patients selected as sample are in 21-30 years age group.
- Majority of the respondent are Male.
- Majority of the respondents are Married.
- Majority of the respondents are coming from rural area.
- Majority of the respondent monthly income is 10,000 to 25,000.

#### *D. Respondents perception about work life balance*

- Most of the respondents feeling are good in questions and worries are answered by Rohini hospital.
- Most of the respondents are selected agree about the treatment given by Rohini hospital.
- Most of the respondents feeling good in experience with Rohini hospital staffs.
- Most of the respondents are satisfied rating with Rohini hospital.
- Most of the respondents says very good waiting area in Rohini hospital.
- Most of the respondents are feeling neutral with Rohini hospital.
- Most of the respondents are feeling neutral about the comfort on room & facility in Rohini hospital.
- Most of the respondents are feeling satisfied about there needs are being met in Rohini hospital.
- Most of the respondents are feeling neutral with the care provided by Rohini hospital.
- Most of the respondents are satisfied with the Rohini hospital schedule.
- Most of the respondents are satisfied with pain management program.
- Most of the respondent are select good about Rohini hospital staff treat patients.
- Most of the respondents feel satisfied with the licensed nursing staff.
- Most of the respondents are satisfied about clean and safety environment in Rohini hospital.
- Most of the respondents are select neutral about satisfaction towards hospital all time.
- Most of the respondents feel satisfied on keeping personal information confidential.

- Most of the respondents are saying no, for recommend this service to all
- Most of the respondents are coming by the way of referred by relatives.
- Most of the respondents are feeling neutral in surgery.
- Most of the respondents feel satisfied about the Rohini hospital staff treat patients in emergency time.
- Most of the respondents feeling neutral about the doctors are continue checkup in after discharging patients.
- Most of the patients feel neutral about the transportation facilities in Rohini hospital.
- Most of the respondents are feel neutral in payments.

#### *E. Suggestion about Rohini hospital*

##### *1) Service*

Patients are not satisfied in your service. Some patients are only satisfied your service. You can improve your staff service and responses.

##### *2) Surgery*

In patient's point of view, surgery is not satisfied to all patients. So you can improve the surgery service.

##### *3) Payment*

Payment is feasibility to all the patients. 3 types of people also satisfied on payment.

##### *4) Room and facility*

Room and facility are good but patients are want more than silence and more facility.

##### *5) Staff communication*

Nurse and staffs are treat patients are good. But you will improve that staff communication.

#### *F. Suggestion about Meenakshi hospital*

##### *1) Service*

The service is very good in Meenakshi hospital. Patients are satisfied about you service. You can improve for developing your hospital.

##### *2) Surgery*

The surgery is also good. Patients are satisfied in surgery. You can improve for developing your hospital.

##### *3) Payments*

In patients point of view, the payment is only not satisfied, high level people are only comfort with payment. Middle level people are neutral about the payment. Low level people are not satisfied to the payment.

## **5. Conclusion**

Patient satisfaction is not a clearly defined concept, although it is identified as an important quality outcome indicator to measure success of the services delivery system. Patient evaluation of care is important to provide opportunity for improvement such as strategic framing of health plans, which

sometimes exceed patient expectations and benchmarking. The advantages of patient satisfaction surveys rely heavily on using standardized, psychometrically tested data collection approaches. Therefore, a standardized tool needs to be further developed and refined in order to reflect positively on the main goals of patient satisfaction survey. This literature review provides a comprehensive understanding of determinants of patient satisfaction either dependent or in-dependent variables, and compares the magnitude of the effects of various independent healthcare dimensions on overall patient satisfaction. There was a common salient determining factor between the studies which was interpersonal skills in terms of courtesy, respect by healthcare providers in addition to communication skills, explanation and clear information, which are more essential and influential than other technical skills such as clinical competency and hospital equipment.

Although feedback from patient satisfaction surveys is an established yardstick for healthcare quality improvement plans, they are still not being systematically and extensively utilized for developing improvement initiatives. Furthermore, it is

agreed that a patient satisfaction questionnaire is considered to be a significant quality improvement tool; therefore, detailed description of the different questionnaires that have been used to assess patient satisfaction surveys will be discussed extensively in a separate study. Finally, this review of various elements of patient satisfaction ranging from its measurement, predictors for improving overall patient satisfaction and impact of collecting patient information to build up strategic quality improvement plans and initiatives has shed light on the magnitude of the subject. It thus provides the opportunity for organization managers and policy makers to yield a better understanding of patient views and perceptions, and the extent of their involvement in improving the quality of care and services. Furthermore, managers implement effective change by unfreezing old behaviors, introducing new ones, and re-freezing them for better healthcare.

### **References**

- [1] Rashid Al-Abri and Amina Al-Balushi, "Patient Satisfaction Survey as a Tool Towards Quality Improvement," in *Oman Med J.*, vol. 29, no. 1, pp. 3-7, January 2014.