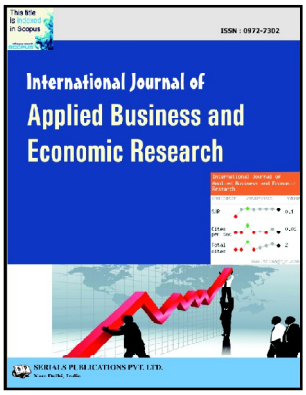

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A Study on Quality, Trust and Satisfaction of Patients in Hospital Sector

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Abstract: The patients or the individuals use healthcare services for basic reasons i.e. to cure illness, to prevent future healthcare problems, on the way to boost up the quality of life etc. Over the past decades, healthcare delivery system has undergone incredible and remarkable changes including online services, medical tourism, health insurance services, home care medical services etc. The need for understanding better healthcare services is very important not only in case of patients but also on behalf of healthcare professionals. According to the report by IBEF, Indian healthcare sector is expected to grow up to 22.87% CAGR during 2015-2020. Also the total expenditure on healthcare services increasing in a better way. The objective of the study is to analyze the quality, satisfaction and trust of patients or consumers.

Keywords: Medical tourism, telemedicine, preventive health management, out-patient services, in-patient services.

INTRODUCTION

Healthcare is the term defined as the services which are offered to the patients or individuals by the healthcare professionals to promote, maintain, monitor and restore the better health [WHO, 2014]. Healthcare is for safeguarding or enhancing better health with the help of diagnosis, treatment and prevention of diseases and other impairments in physical or mental health. Now-a-days, need for excellent health care is at the higher priority. According to the report by IBEF, Indian healthcare sector is one of the top budding industry, expected to advance at a CAGR of 22.87 per cent during 2015–20 to reach USD280 billion and due to this there is the vast scope of healthcare services in India [IBEF, 2016]. The total expenditure on healthcare services was about 5% of total GDP in 2013 and is likely to hang about all the way through the year 2016 [Deloitte, 2014].

Previously, there were large opportunities in acute healthcare sectors but at present scenario the impact of chronic healthcare sector has widely distributed because there is high penetration of lifestyle

diseases. The top listed lifestyle diseases in India are- diabetes, cancer, hypertension, obesity etc. which resulted in various health activities like health insurance, medical tourism, online services etc.[Bhavyajyoti, 2014]. Today, majority of the people go towards the health insurance policies to keep them at the safer side. According to the latest report, a smaller amount than 15 per cent of the Indian population is enclosed with health insurance.

Basically, the patient need various levels of care during their entire treatment process and the 3 types of levels or care are as follows [Bhandari and Dutta, 2007]-

1) Primary healthcare centres- The first and the foremost level is the primary level where the essential healthcare is provided to the patient. This is the first level of contact in between the patient and the health system. This is provided by the primary healthcare centres. Total primary healthcare centres in India are about 25308 [Ministry of Health and Family welfare statistics, 2015].

2) Secondary healthcare centres- This is the first referral level where the more complex problems are dealt. It comprises the curative care to the patient. This is provided by the district hospitals. Total secondary healthcare centres in India include 1,200 PSU (public sector units) hospitals, 4,400 district hospitals, and 2,935 community healthcare centres [ITA, 2014].

3) Tertiary healthcare centres- In this case the super specialist services are provided by the regional or central level institutions. Here trainings are also being provided to the patients for better healthcare. Total tertiary healthcare centres in India are 117 medical colleges and hospitals [ITA, 2014].

In this way, Indian patients are dependent on these 3 types of healthcare levels where they can better opportunities to get the best treatment for their diseases under trained professionals. Talking about the number of hospitals in India, according to the data from 2010 there are about 33% hospitals in tier I cities and the rest are in tier II and tier III cities [EH news bureau, 2015]. The following figure shows the data related to hospitals as well as comparison in between them. According to the report, the doctor-patient relationship for rural India stands at 1: 30,000 below the WHO recommended 1:1000 [IBEF, 2016].

The healthcare services not only help patients to treat them healthier but also are ready to lend a hand for the other individuals who are not directly involved but they get the benefit in some way. To get those services the individuals go behind a pattern for the same to follow healthcare systems which help them in enhanced way.

The Beveridge model: This type of model was named after a social reformer William Beveridge. This type of model provides healthcare financed by the government through tax payments like police force or the public library pays. The countries where this type of model used are- Spain, Great Britain, New Zealand, Hong Kong. This model system have the low cost per capita as in these countries government is the only payer which controlled the benefits and payment [Viorela-Ligia, 2015].

The Bismarck model: This model was named for the Prussian Chancellor Otto von Bismarck, who invented the welfare state as part of the unification of Germany in the 19th century. It uses an insurance system where the insurers are known as "sickness funds" and is usually financed in cooperation with the employers and employees through payroll deduction. This model is found in Germany, France, Belgium, The Netherlands, Japan, Latin America and Switzerland. This gives a stretched be in charge of giving government a great deal of the cost manage.

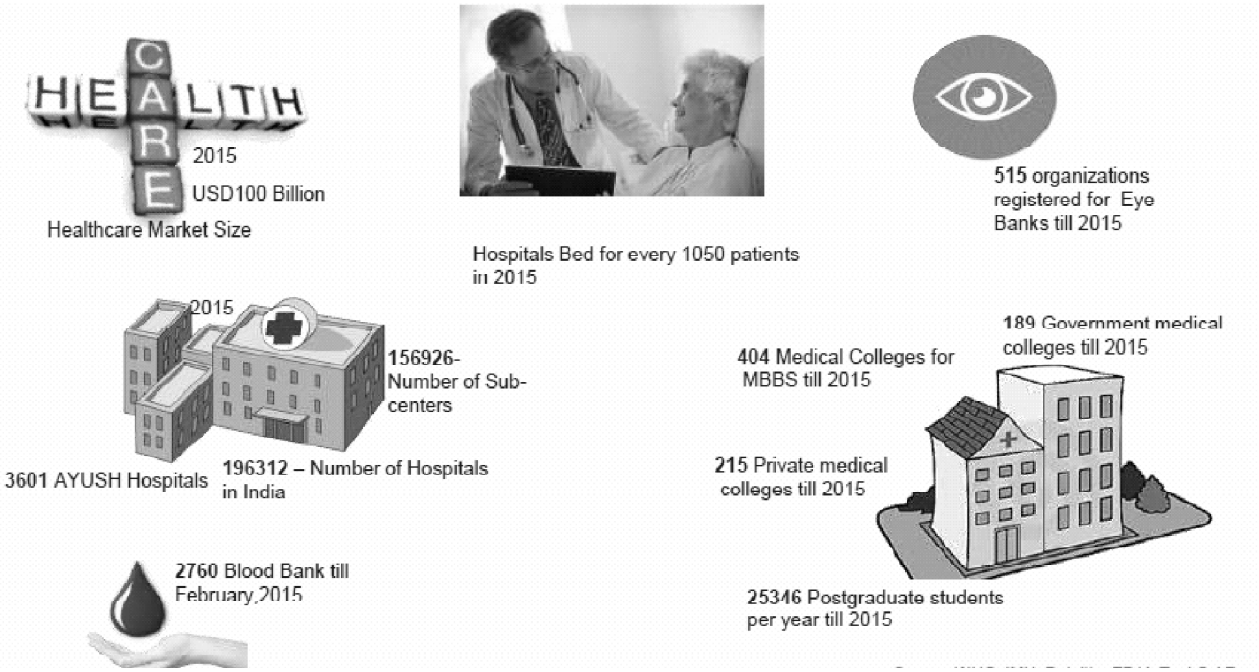

Figure 1: Representing data for hospitals detail

Source: WHO, IMH, Deloitte, EBAI, TechSci research, 2016

The National health insurance model: Both Beveridge and Bismarck models are applied here. It uses private-sector providers however payment comes from a government-run insurance program. There is no requirement for marketing, no financial motive to deny claims and no profit. The main advantage with this type of model is that it tends to be cheaper. This model is found in Taiwan, South Korea and Canada. The single spender in such type of countries has substantial market authority to consult for the lesser prices which helped a lot.

The out-of-pocket model: Talking about developed countries, they have established healthcare system in a great way. The fundamental rule for such countries is that the rich patient will get better medical assistance while the poor stays sick or may die in severe conditions. This type of model is applicable for the developing countries where the patients don't able to get the required healthcare services. The countries where this model is applicable are- India, Bangladesh, Pakistan etc. This helped the poor people to get the better treatment for which they cannot pay.

The public-private partnership: This is the widely used model at present time. The governments in developing countries have been continuously in front of the challenge to meet the growing demand for better healthcare services [Economic and Social Commission, 2011]. But due to limited funding the government found the partnership with the private sector. This partnership helped to increase the supply of enhanced healthcare service to the individuals.

Thus, implementing such models in the places helps the patients to get better services at the right time. The patients not only get benefitted but commercializing such services helps the health care providers to get acknowledged and assurance. This is considered to be the best recipe for the healthcare services.

OBJECTIVES OF STUDY

The following are the main objectives of the study-

- To analyse the parameters of patient evaluation towards healthcare services
- To assess the quality of healthcare services provided by hospitals.
- To identify the gap in the healthcare services and recommend the strategies to increase patient satisfaction.

LITERATURE REVIEW

The patients or consumers are the foremost stakeholders in healthcare services because they are the end consumers. There are various factors that grounds assortment and refusal of the services provided by the providers such as quality, trust and satisfaction.

Quality of services

Another important factor for the healthcare services is the quality. The quality in healthcare is defined as the art of rendering the right thing to the right person at right time in sake of good positive results [Zineldin, 2006]. The quality of good healthcare is the extent to which the services lend a hand to get the considered necessary health outcomes with the help of incessant efforts of healthcare knowledge [Lohr, 1990].

Now-a-days, hospitals are much more focussed towards the quality services in their area. The basic 3 components of quality services are: physical process, people's behaviour and professional judgement [Haywood, 1988] and it includes-

a) All technical facilities, process and procedures of hospitals
b) Available staff behaviour and their services
c) Efforts by professionals or administrators to improve quality of services.

All researchers have their own discussions related to quality of healthcare and various models were applied in that. The major elements of the quality of healthcare services are divided into 5 dimensions i.e. tangible, reliability, responsiveness, empathy and assurance [Parasuraman et.al, 1985]. This model is also known as SERVQUAL model. The researchers said that quality of healthcare services has 2 dimensions- technical dimension- the core services provided and functional dimension- how the services are provided [Groonroos, 2000]. In general it can be explained that service quality is explained in two terms technical aspects and interpersonal care.

SERVQUAL model was first created by Parasuraman and in that 97 attributes were put into 10 dimensions [Parasuraman *et. al.,* 1985]. More researches converted 10 dimensions into 5 dimensions [Laroche *et.al.,* 2004]. The dimensions were further explained as-

a) Tangibility- Consists physical facilities, equipments and personnel appearance
b) Reliability- deals to perform promised service dependably and accurately by hospitals
c) Responsiveness- focuses on willingness to help customers

d) Assurance- explains how knowledge and courtesy of employees and their ability to trust and confidence.

e) Empathy- how much attention hospitals provides to its customer.

It was resulted that the 3 dimensions i.e. responsiveness, assurance and empathy were the major factors while tangibility and reliability were not the major factors affecting patient satisfaction [Wong, 2002]. Further by the researches, it was found that one more dimension worked under healthcare services. The 6 dimensions applied are- Tangibility, Reliability, Responsiveness, Assurance, Empathy and Affordability [Lim *et al.,* 2000]. A 5Q model was designed by Zineldin in some Egyptian medical clinics which described quality of healthcare services. The 5Q's were- quality of object, quality of processes, quality of infrastructure, quality of atmosphere and quality of interaction [Zineldin, 2006]. This concept concludes the quality of services in a better way on behalf of employees or customers or providers.

Trust

Trust is like a source for freedom of other or is the social relationship and created some expectations [Laroche *et al.*, 2004]. Trust can be a factor depending on objects or behaviour of person to systematize the required objectives in hazardous state of affairs [Jones, 2002]. It is like a passion for the individual or provider to hear or listening the consumer or patient and showing the dedication.

It is defined that patient trust is connected with the devotion to the treatment and recommendations [Giffin, 1967]. According to the study conducted, 7 dimensions were considered to be important for the patients to trust the providers and they are as follows [Sofoer *et al.,* 2005]-

1. Patient-centred care
2. Access
3. Courtesy and emotional support
4. Communication and information
5. Technical quality
6. Efficiency of care Organization
7. Structure and facilities

Customer and patient satisfaction

Satisfaction is one of the important factor by which the patient or customer experience to receive the services. The progression of satisfaction is similar to a constructive reaction of the patient to practice the services at a defined period. [Shemwell *et al.*, 1998]. In the study, it was explained that the behaviour of all staff members, interaction or communication between patient and physician, related to issues of administration of the health facilities provided and physical environment are the dimensions for maintaining the satisfaction level of the patients [Rapert *et al.,* 1996]. The main reason for decrease in the patient satisfaction is seen when there is a gap between patient's expectations and the services received [Abdal *et. al.,* 2009].

In this way, various factors contribute in healthcare services which directly or indirectly helped the patients or consumers for improved health. The change in the attribute of the patients majorly plays a role

in healthcare sector as if the patient is not satisfied then it would be difficult for the hospitals to provide better health.

GAP IDENTIFIED IN THE AREA OF HEALTHCARE SERVICES

From the various studies there were some positives or negatives in healthcare services. There were various factors which created the gap in between the provider and the patient while delivering the healthcare services.

The most important considered gap from the studies was that there was huge gap in between the services provided by the government and the private providers. As compared to the services provided by the government hospitals were much lesser as with private hospitals. At present time, the private hospitals have widened their area in providing the health services. Private hospitals are more concerned with their administration, staff, doctors, infrastructure, work environment etc. The services provided are much easier in availability and affordability as the private players are much focussing on online services as this is the best way to provide the services in better way. In this field, government hospitals have to focus on their infrastructure, work environment and other related factors by which they can give expected satisfaction to the patients.

PARADIGM SHIFTS IN HEALTHCARE SERVICES

A huge transition shift had been noticed in last one decade in terms of healthcare services. Patients are becoming more informed and digital devices are making these services only one click away. So, this change in services results in more patient satisfaction. This shifts in healthcare services is due to many factors and some of them are as follows-

1) **Emergency services-** Sometimes, patients face serious accidents in their life where they need urgent treatment. For this toll free numbers and also ambulance services are at the reachable places.

2) **24*7 convenience -** It is highly impossible for the family members to take care of their old parents every time. So, they want the services through which they can take care of them and thus hospitals are providing home care medical services for those patients.

3) **Ease of availability-** Today due to monotonous and hectic life schedule patients or the customer needs such type of services which are easily available whenever they require.

4) **Growing significance of healthcare insurance** Some times, health insurance policies cause the patients to get the services through various systems giving significance for better healthcare.

5) **Stagnant lifestyle-** This is the important factor responsible for change in shift as the disease patterns are totally changed i.e. the lifestyle and deadly diseases are at higher cost.

6) **Rise in medical tourism-** This factor is like a boom in healthcare sector because the patients are much more conscious and responsible for their loved ones which results in medical tourism.

7) **Preventive health management-** Now-a-days, hospitals are following the quote as "prevention is better than cure" and are giving different services like full health check-up and other useful diagnostic services which help the patients to detect their diseases at early stage.

CONCLUSION

There are many challenges which are still left behind in healthcare sector to provide better services and also to maintain the good standards of the services. The increase in importance of services will further enhancing as the time changes because of change in lifestyle and other related factors like convenience, quality, security etc. There must be an extensive and considerable necessity by which new ideas can be generated that will further help out the healthcare professionals and end customers.

At the present time, not only private players but also public players are emerging in a new direction to treat the patients and also recovering the eminence of infrastructure and availability of services. The inflow in the hospitals, diagnostic centres and their services helped a lot to the needy ones. The government is now forcing to emphasize on eHealth activities such as Mother and Child Tracking system (MCTS). The healthcare services are now not only helping in terms of revenue or employment but is now reinforcing its coverage area by giving best services through public or private players.

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