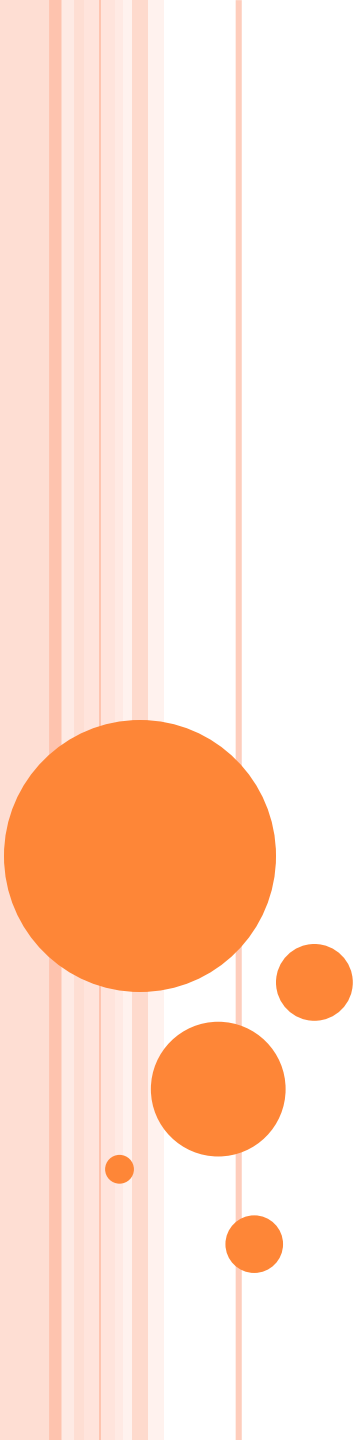




PATIENT PERCEPTIONS TOWARDS SERVICE QUALITY AT COCOON: MATERNITY HOSPITAL, JAIPUR

- Dr. Henna Juneja

INTRODUCTION

- Patient satisfaction and quality of service is a multidimensional aspect.
- To improve quality of health services it is most important to obtain feedback from the consumer be it patient or patient party.
- In every aspect satisfaction depends mostly on the expectation.
- So to measure quality of services in a hospital it is important to measure patients or patient party's expectation and perception and find out their knowledge so as to evaluate quality of services.



- There are different methods for determining the patients' expectations and service quality but among all of them SERVQUAL model, developed by Parasuraman et al is one of the best models for assessment of patients' expectations, perceptions and quality of the services.
- SERVQUAL is based on the idea that the quality is a subjective evaluation of the customer, as the service is not a physical item but an experience.
- Service quality can be measured on the basis of five dimensions; reliability, tangible, responsiveness, assurance and empathy and these five dimensions were further assessed by 22 items.



- Service quality can be measured on the basis of five dimensions-

Tangibles

Reliability

Responsiveness

Assurance

Empathy



RESEARCH QUESTION

- How do consumers perceive service quality?
- What are the gaps in the service quality offered by the Hospital?



OBJECTIVES

- To measure consumer perception of service quality in the hospital.
- To identify gap between the perceived and expected service quality of the consumers and identify the areas in which improvement can be made.



METHODOLOGY

- **Study Design**

Descriptive cross sectional study.

- **Study setting**

The study was conducted in the Inpatient Department of Cocoon Hospital during the month of March and April 2019. The aim of the study was explained to the respondents and they were assured the privacy of their information.

- **Sampling and data collection**

The survey samples for this study was obtained from patients and attendants at Cocoon hospital. In constraints of resources, samples are selected by convenience from the IPD area. The self-administrated questionnaires were delivered to patients and attendants.

- **Primary data collection using structured questionnaire including 18 points from Parsuraman et al scale.**



- **Study population**

Inclusion- Patients admitted to the inpatient department of Cocoon Hospital

Exclusion- OPD patients

- **Study Instrument**

The study questionnaire consists of 2 parts: The first part includes 18 items before coming to cocoon hospital and second part consists perception of services after coming to the hospital under 5 dimensions namely a.)Tangibles, b.) Reliability, c.) Responsiveness, d.)Assurance and e.) Empathy on a 5 point LIKERT scale.



Analysis Plan

- Primary Data collected using self administered questionnaire.
- Data entry done using Microsoft excel.
- After entering the data in the respective dimensions, a mean score for each statement of each dimension was calculated for both the perceived scores (P) and expected scores (E).
- Then the gap score was calculated by $P-E$ which provided a gap between the actual performance and the desired result.
- If the gap score is positive, the patients perceptions exceeds their expectations. If the gap score is congruent, it implies satisfactory performance, and negative gap score implies level of dissatisfaction and focuses where improvements can be made to attain maximum service quality.



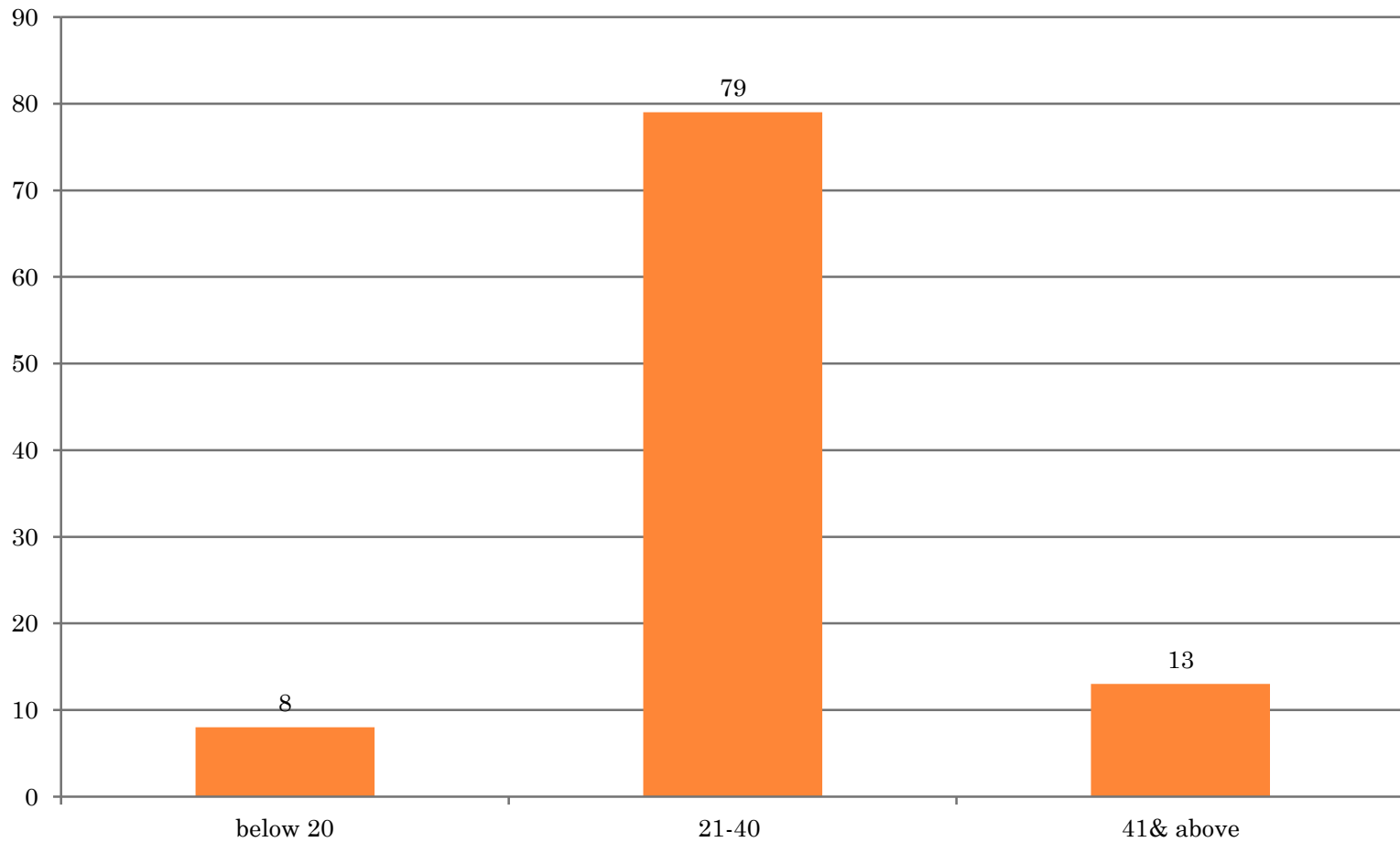
QUESTIONNAIRE

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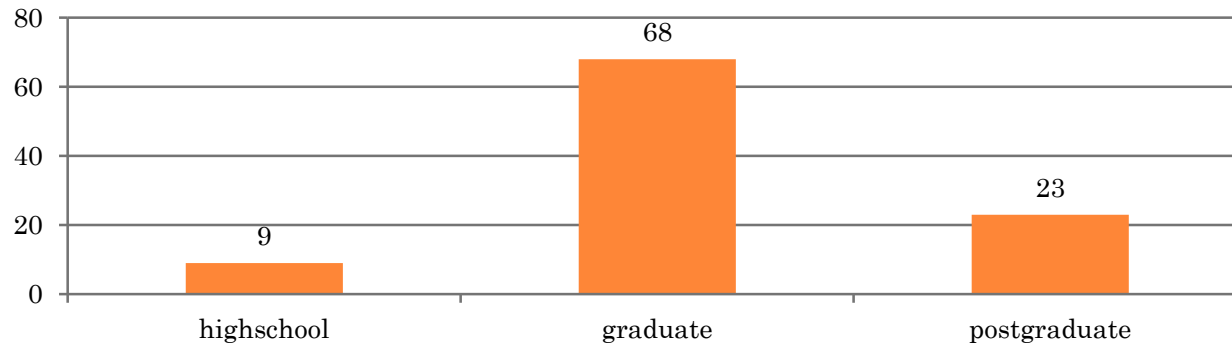


PATIENT CHARACTERISTICS

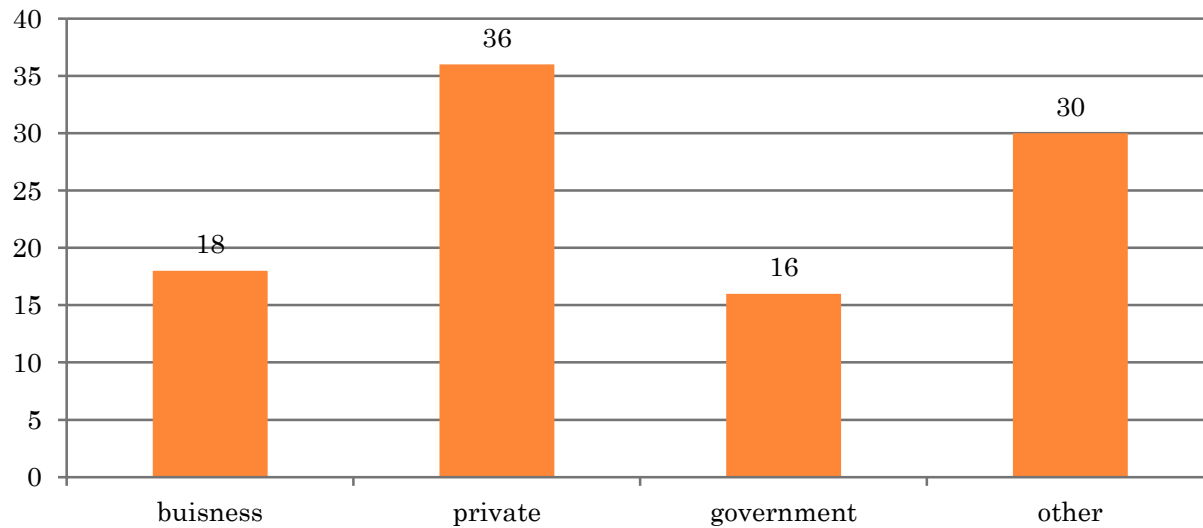
Age range



Educational level



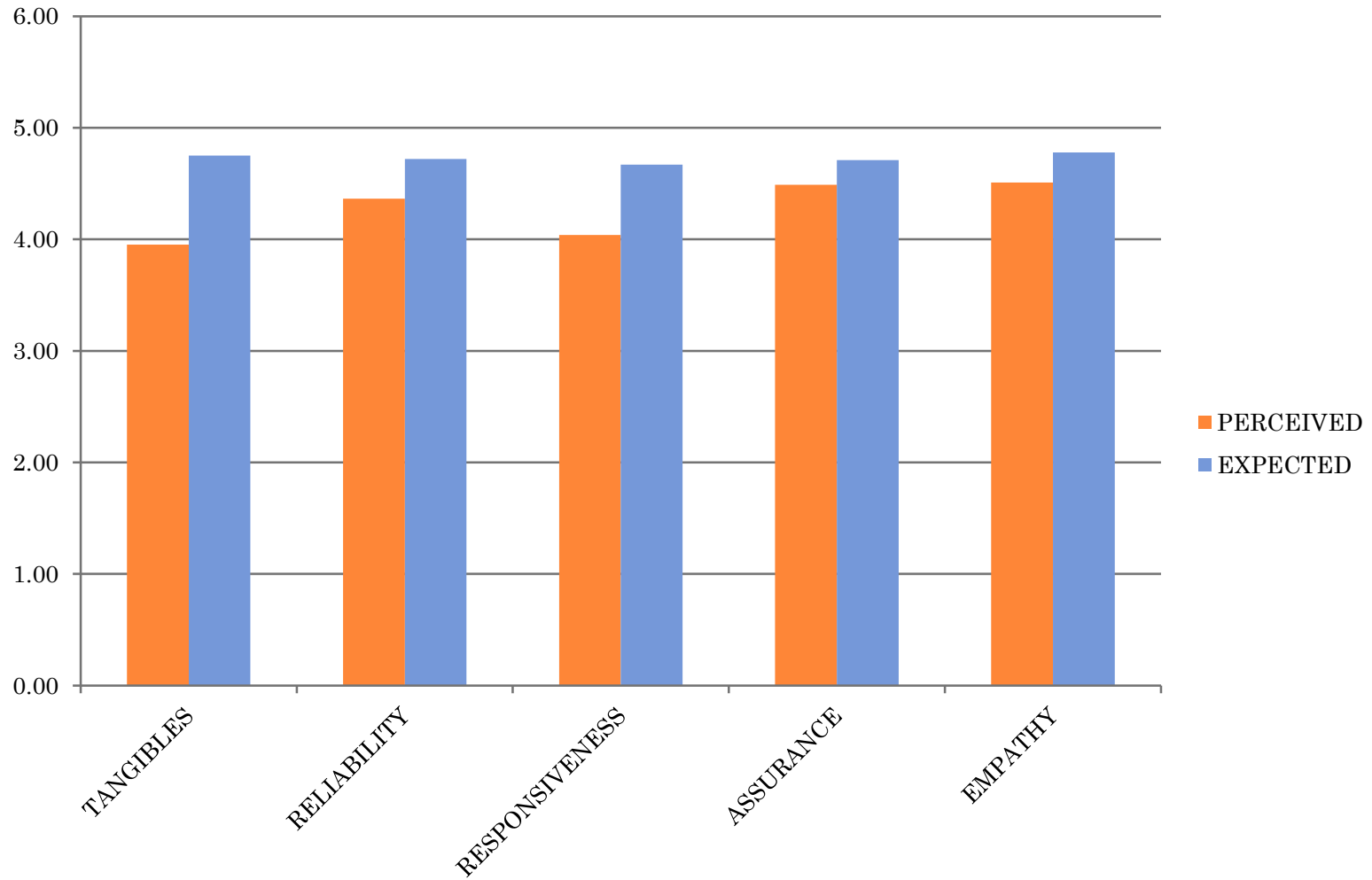
Occupation



SERVQUAL SCORE

DIMENSION		PERCEIVED $\pm$ SD	EXPECTED $\pm$ SD	GAP(P-E)	AVG. GAP
TANGIBLES	TAN1	3.78	4.76	-0.98	-0.8
	TAN2	3.72	4.74	-1.02	
	TAN3	4.36	4.76	-0.4	
RELIABILITY	REL1	4.14	4.68	-0.54	-0.35
	REL2	4.54	4.68	-0.14	
	REL3	4.66	4.72	-0.06	
	REL4	3.94	4.74	-0.8	
	REL5	4.54	4.78	-0.24	
RESPONSIVENESS	RES1	3.8	4.66	-0.86	-0.63
	RES2	3.92	4.66	-0.74	
	RES3	4.44	4.72	-0.28	
	RES4	4	4.64	-0.64	
ASSURANCE	AS1	4.66	4.8	-0.14	-0.22
	AS2	4.6	4.66	-0.06	
	AS3	4.48	4.72	-0.24	
	AS4	4.22	4.66	-0.44	
EMPATHY	EMP1	4.32	4.78	-0.46	-0.27
	EMP2	4.7	4.78	-0.08	

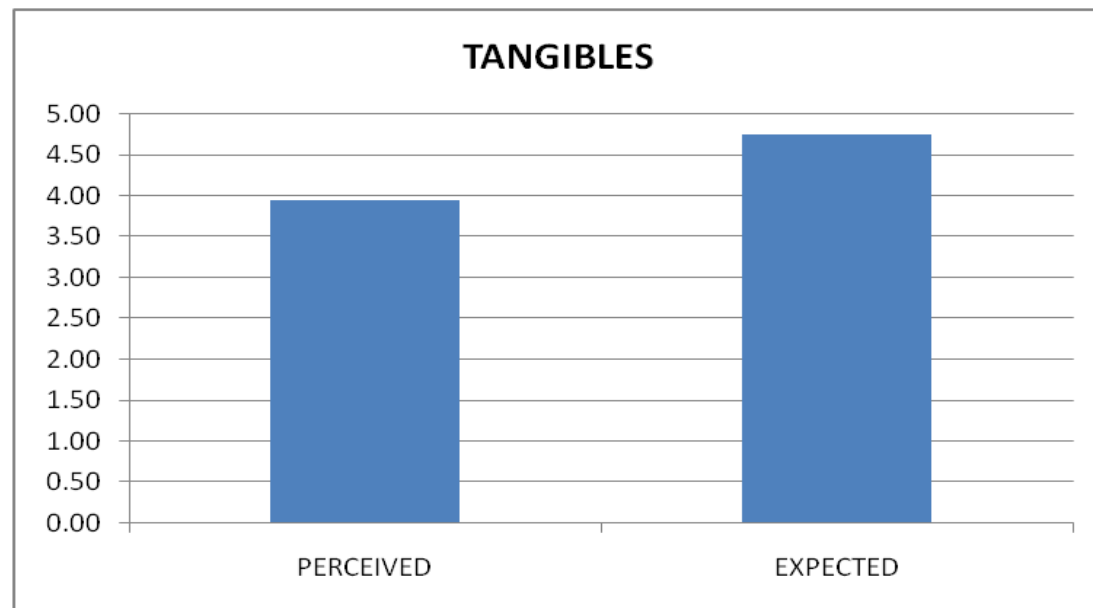




DESCRIPTIVE STATISTICS ON TANGIBILITY

DIMENSION

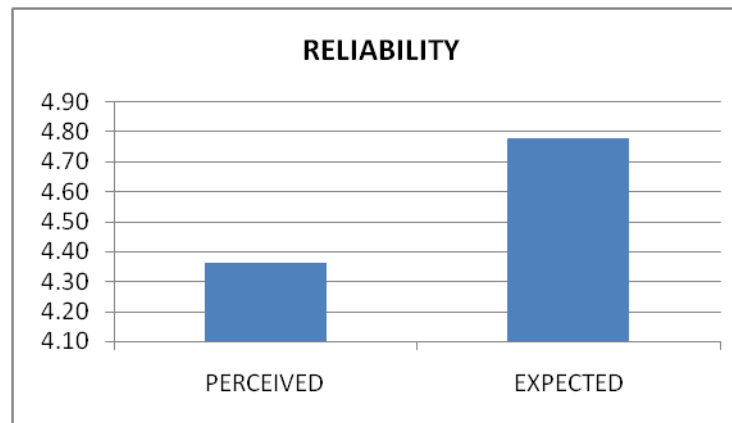
	Statement	Expectation		Perception		Gap (P-E)
		Mean	Std	Mean	Std	
TAN1	Up-to-date equipment	4.76	0.653197	3.78	1.38	-0.98
TAN2	Physical facilities are visually appealing	4.74	0.596623	3.72	1.348999	-1.02
TAN3	Employees well- dressed/neat	4.76	0.473969	4.36	0.772246	-0.4



DESCRIPTIVE STATISTICS ON RELIABILITY

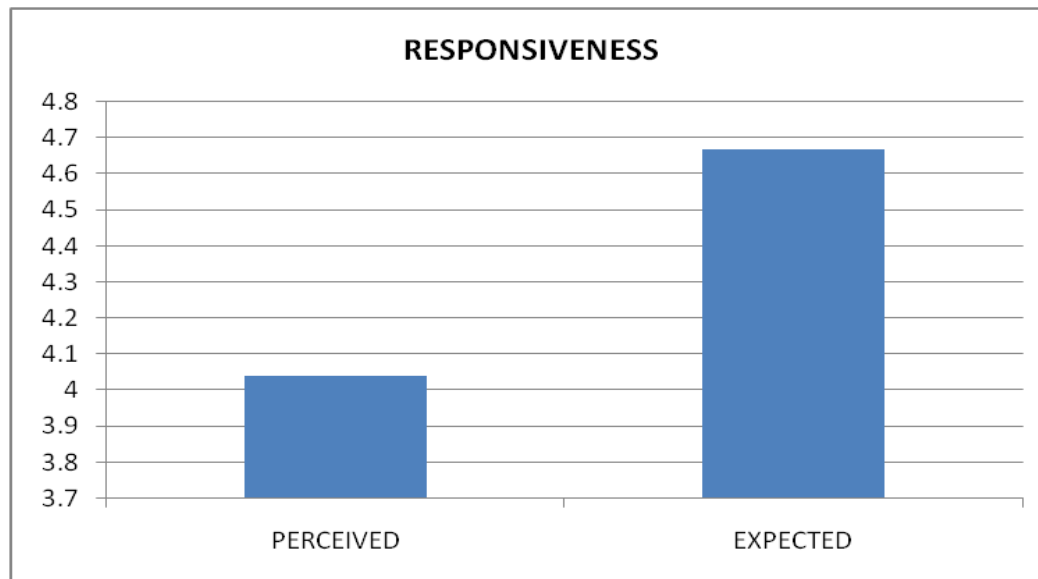
DIMENSION

	Statement	Expectation		Perception		Gap (P-E)
		Mean	Std	Mean	Std	
REL1	The hospital meets their promised time-frames for response	4.68	0.71	4.14	1.04	-0.54
REL2	The hospital staff is sympathetic and reassuring, when the patient has problems	4.68	0.51	4.54	0.64	-0.14
REL3	Employees are dependable	4.72	0.57	4.66	0.68	-0.06
REL4	They provide their services at the times promised	4.74	0.52	3.94	1.09	-0.8
REL5	They keep accurate records	4.78	0.54	4.54	0.90	-0.24



DESCRIPTIVE STATISTICS ON RESPONSIVENESS DIMENSION

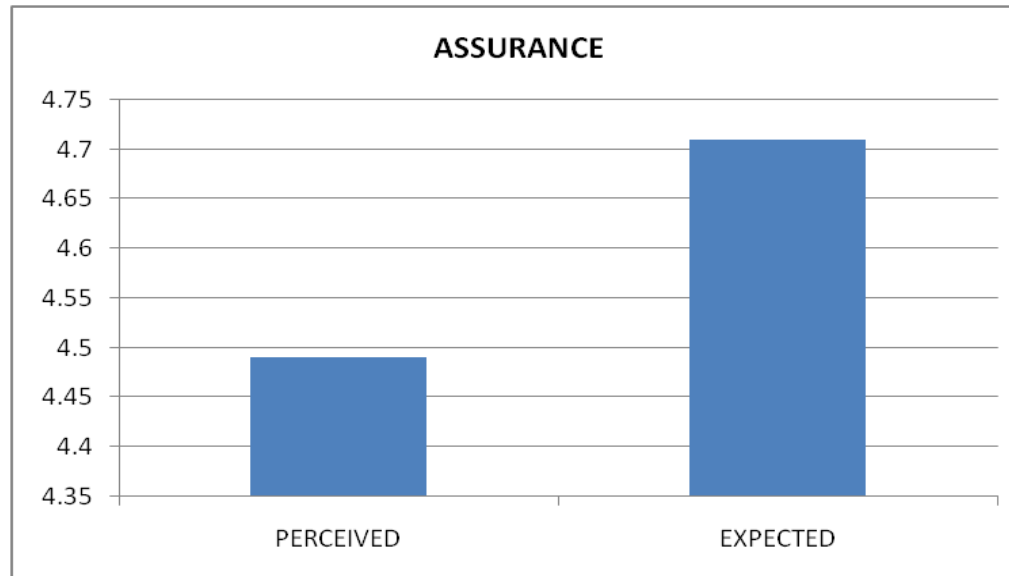
	Statement	Expectation		Perception		Gap (P-E)
		Mean	Std	Mean	Std	
RES1	Expected to tell patients exactly when the service will be performed	4.66	0.59	3.8	1.21	-0.86
RES2	Prompt service from employees.	4.66	0.62	3.92	1.08	-0.74
RES3	Employees always willing to help customers	4.72	0.70	4.44	0.86	-0.28
RES4	Prompt response to patient requests	4.64	0.63	4	1.01	-0.64



DESCRIPTIVE STATISTICS ON ASSURANCE

DIMENSION

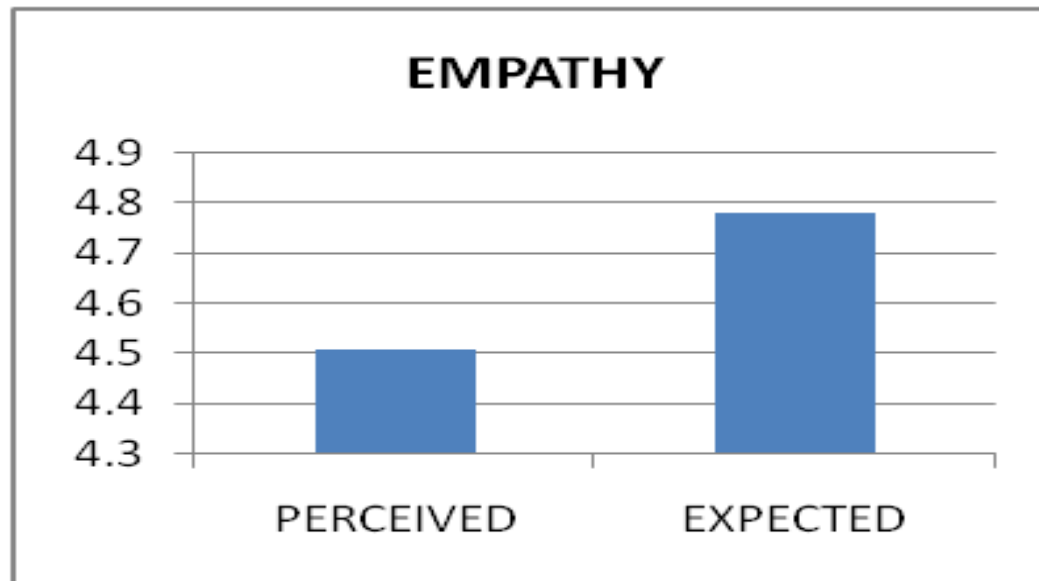
	Statement	Expected		Perceived		Gap(P-E)
		Mean	Std	Mean	std	
AS1	Employees are trustworthy	4.8	0.53	4.66	0.71	-0.14
AS2	Patients feel safe when transacting with employees	4.66	0.65	4.6	0.67	-0.06
AS3	Employees are polite	4.72	0.53	4.48	0.86	-0.24
AS4	Employees get adequate support from the hospital to do their job well	4.66	0.62	4.22	0.79	-0.44



DESCRIPTIVE STATISTICS ON EMPATHY

DIMENSION

	Statement	Expected		Perceived		Gap(P-E)
		Mean	Std	Mean	Std	
EMP1	Employees give individualized attention	4.66	0.62	4.32	0.79	-0.46
EMP2	Employees have the best interests of the patient at heart	4.78	0.50	4.7	0.71	-0.08



RECOMMENDATIONS

- As per the study results the lowest perception is from the tangibles dimension, so the hospital should take its first step in improving the appearance and functioning of the physical facilities, neat and tidy uniforms.
- The gaps in the reliability dimension indicate a weak relationship between the doctors , nurses and other health personnel and the patient/patient party. So the health care provider staff should take out time to explain and educate patient about diagnosis, treatment, prognosis, post operative care etc and hence building trust of the patient towards treatment service and the staff.
- To improve the responsiveness of the services, the hospital should try and adhere to the TAT of the services such as the reports from the lab, procedure, OT schedule, discharge time etc. Proper training of the staff regarding the service processes can help in enabling them to respond to queries promptly and also help in reducing TAT.



- For improving assurance dimension, the patients should be interacted in a way that they are assured by the knowledge and courtesy of the employees and have trust and confidence in the treatment and care provided to them by the staff. Hiring qualified staff and staff training can play an important role in improving this dimension.
- Empathy dimension being the highest expected service from the patients indicates the importance of the soft skills. Soft skill training of the staff should be to be to be kind, courteous, concerned and understanding of the patient's problems.



LIMITATIONS AND PROBLEMS FACED

- Sample size is small and is taken by convenience sampling, so it cannot be generalized for a large population.
- The responses of the patients were subjective; depend on their personality, perception and preference. Some might be satisfied with the average as well as some might be dissatisfied with the best of the services.
- It was challenging to get the patient/ patient family to fill the questionnaire as the admitted family is often in stress.
- Many questionnaires were left incomplete which had to be excluded from the study.
- Since the expectations of the services were also filled after the admission and stay of the patient at the hospital, the responses may be biased.



CONCLUSION

- The results show that SERVQUAL is an efficient model to monitor and measure the service quality and enables the hospital administrators to identify the area that needs improvement from the patient perspective. The results of the study can be used in planning, monitoring of the quality improvement of Cocoon hospital.



THANK YOU

