Effectiveness of Service Delivery in Cardiology Based Corporate Hospitals

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ABSTRACT: Patient satisfaction is one of the sensitive indicators in determining the effectiveness of service rendered in hospitals. The study focus on comparing the health care services of two cardiology based corporate hospitals in Hyderabad, Andhra Pradesh, India. The data for the study was collected through a questionnaire consisting of two sections. An attempt has been made to elicit the information on socio-economic background such as age, sex, education, nativity, profession, income of the patients to assess the background of the patient. The satisfaction levels of the patients like admission process, comfort facet, information on food facilities, level of care taken by the concerned, working of business office and discharge procedures are measured. The instrument is tested for its reliability and validity. The collected data is analyzed by applying descriptive and inferential statistical techniques such as means, standard deviations and ANOVA-one way tests for testing the hypothesis that the perceptions of patients are indistinguishable with respect to the performance indicators. It is concluded that the perceptions of the patients on the performance in two hospitals are not significantly varying.

Keywords: Service quality, Service economy, Service providers, Patient satisfaction, Influencing factors

INTRODUCTION

In service economy, customers are more critical and keen towards quality services and demand for high standards. The primary function of a hospital is patient care. The patient is the ultimate consumer to the hospital. Patient satisfaction is one of the scales to measure the success of hospital services that it produces. The effectiveness of the hospital relates to provision of good patient care as intended. The patient satisfaction is the real testimony to the efficiency of hospital administration. This satisfaction gives the patient confidence to face the disease. In this context, it becomes imperative to know what gives the patient satisfaction. As the hospital serves all the members of the society and the expectations of the users differ from one

individual to the other because everyone carries a particular set of thoughts, feelings and needs. Satisfaction results from customers good experiences. According to Westbrook, satisfaction a state of recognition to feel appropriate or inappropriate experience for the sacrifice adequately, or an emotional response which is not only affected by the whole market, but also affected by product's characteristics, service, and seller when shopping or doing similar behavior. Oliver, discusses satisfaction as a general psychological state which is about the expectations for feelings and experience from given behavior.

Patient satisfaction is defined in terms of the degree to which the patient's expectations are

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fulfilled. According to Lochoro, it is an expression of the gap between the expected and perceived characteristics of a service.

Several studies were undertaken on patient's satisfaction. In one recent study done by Francis Sudhakar and Rahul (2002) conceptualized that the value of marketing revolve around a concept of educating patients, providers, payers and employers in the unique manner in which the health care organisation can legitimately maximise patient encounters. Manimaran (2011) has concluded as the hospital administrators should improve the intangible aspects, up to date technological requirements in order to create a good image and service rendering to the patients. Marini Resiberg (1996) said that patients are to be treated with respect and caring they deserve. Ramaiah and Acharyulu (2011) identified patient interactions, timely services and supply of medicines as the major factors affecting quality of service at the hospitals. Akoijim (2007) opined that younger patients tend to have higher satisfaction and patient satisfaction level tended to decrease with increase in educational levels. Jawahar (2007) added that the patients are with guidance, the arrangements, support services, nursing care, doctors consultation etc. Krishna et al. (2006) opined that better staff and physician interpersonal skills, facility infrastructure, and availability of drugs have the largest effect in improving patient satisfaction at public health facilities. Arshad et al. (2012) concluded that health care delivery can be improved more and more the organisation measures the delivery of quality of care on an ongoing and continually make changes to improve the processes. Yoger et al. (2011) summarised that the nursing services, housing services, medical services, food and beverage services are having greater impact on patient satisfaction level. Aldebasi and Ahmed (2011) mentioned in his article that patient satisfaction is one of the most sensitive indicator of the quality of their services. Mufti et al. (2008) stated that patient satisfaction surveys should become a regular outcome monitoring feature in all the hospitals. In service training programs for nurses, with special emphasis on communication are need for the hour and should become a routine exercise. Prahlad et al. (2010). in his study concluded that if doctors and other staff are courteous to patient, then satisfaction

levels will be high though they have fewer facilities. Kasinath et al. (2010) said that having signboards, explaining the treatment procedures will built a good rapport with the patient. But targeting to reduce complaints is not a sign of improvement. Francis et al. (2012) in their study tried to correlate the patient satisfaction and the quality of service the hospital is providing and also tried to quality the gap between the expected quality and perceived treatment. Thus the subject of patient satisfaction is evergreen topic and very fluid. It is very difficult to tell how and when people are satisfied. As soon as the patient enters the hospital, he interprets something in his mind regarding services. It may be good or bad, so it is imperative that adequate facilities are to be provided in the hospital premises.

Factors Influencing Patient Satisfaction

The concept, scope and philosophy of the hospital of today are different from the past. Earlier, the hospitals were regarded as curative institutions and today these are being recognized more and more as social institutions. In 1950 we were in a farm economy. Later we moved to manufacturing economy. Now we are in service economy. In this service era, relationships are important along with the physical facilities. In service economy, customers become more and more particular about the quality of service they receive and they demand for higher standards. Therefore, hospitals must strive to gain maximum consumer's satisfaction and should provide consumer oriented services.

The patients choose the hospital on one of these bases and after receiving the service, they compare the perceived service with the expected service. If the perceived service is below the expected service the patient will be dissatisfied and may lose their interest in hospital. If the perceived service is met or exceeds their expectations they turned to be satisfiers and opt to come that hospital again and even recommend to the needy persons. In this context, it is becoming imperative for the administrators to know what makes that hospital excellent. In general, the following practices help in making the hospitals patient oriented.

✓ Top service hospitals are patient obsessed. They have a clear sense of their target customers and their needs. The top

managements are committed to quality service, cleanliness and values. They develop distinctive strategies to satisfy the patients. This automatically creates loyal patients.

- ✓ The best hospitals set high service quality standards. The performance is compared to their standards and with competitors on a regular basis which may lead to patient's satisfaction.
- ✓ Cultural factors exert the broadest and deepest influence on patient satisfaction. Cultures, subculture and social classes are important in determining the satisfaction levels. Culture is the fundamental determinant of an individual's wants and behavior. For example, the patient belonging to the rural area will have one set of expectations and the patient coming from urban places will have another set of expectations which gives satisfaction/ dissatisfaction.
- ✓ Each individual will have a self-image. This can also be understood as self concept. This is based on the person's role model. It may be individual's own perceived image or actual image which is based on how others perceived. Excellently managed hospitals keep eye on the self concept of patients and their relatives which have positive correlation with patient satisfaction.
- The person's satisfaction is influenced by the psychological factors such as perception, learning and attitudes. Perception is the process by which an individual selects and interprets the information inputs to create a meaningful picture. Learning involves changes in an individual's behavior that one gains by experience. The satisfaction of patient depends on learning attitude and beliefs. The hospitals who want to become great always create a learning environment.

By keeping above factors in mind, the researchers made an attempt to measure the effectiveness of the service delivery in cardiology based corporate hospitals. The objectives of the study are described as under.

Objectives of the Study

- ✓ To study the effectiveness of service delivery in selected cardiology based hospitals.
- ✓ To compare the perceptions of patients of sample hospitals.
- ✓ To suggest suitable methods to improve the effectiveness of service rendered in corporate hospitals.

Hypotheses

- 1. The perceptions of the patients are indistinguishable with respect to the performance indicators of APOLLO.
- 2. The perceptions of the patients are indistinguishable with respect to the performance indicators of CARE.

RESEARCH METHOD

The researchers have selected two different hospitals in Hyderabad city at different locations. In this study the word 'patients' refers to 'in-patients' and their opinions have been sought in sample hospitals. It is taken in view of the in-patients who spend more time in the hospitals than the out-patients and they have a lot of exposure and access to the hospital environment and treatment.

The socio-economic background of the patients has been delineated to know the status of an individual and background information of the patients. The present study is compiled based on opinions of the respondents from the questionnaire. Patients were taken on the basis of bed strength. Sample was finalized by using stratified random sampling. In each of the hospitals 250 respondents were taken for study. Factors such as age, sex, education, nativity, profession, income etc, are considered.

The distributed questionnaire consists of two parts. Part-1 is on socio-economic information of the patients. Part-2 consists of statement regarding satisfaction levels of patients on service offered. A five degree scale was used. It contains the columns of strongly agree, agree, can't say, disagree, and strongly disagree.

Analysis Part-1 Socio-Economic Information

Table 1: Socio-economic information of sample patients

Sl.No		Particulars	APO	LLO	CA	RE	To	tal
51.110			Total	%	Total	%	Total	%
1	Age	Below 30 yrs (A) 31 – 50 yrs (B) Above 50 yrs (C)	32 176 42	12.80 70.40 16.80	53 147 50	21.20 58.80 20.00	85 323 92	17.00 64.60 18.40
2	Sex	Male Female	112 138	44.80 55.20	156 94	62.40 37.60	278 222	55.60 44.40
3	Education	Below 10 th class (A) 10 th To Degree (B) Above Degree (C)	12 151 87	4.80 60.40 34.80	17 137 84	6.80 54.80 33.60	29 288 171	5.80 57.60 34.20
4	Nativity	No Formal Education (D) Rural Urban	118 132	47.20 52.80	12 121 129	4.80 48.40 51.60	239 261	2.40 47.80 52.20
5	Profession	Govt. employee(A) Private employee(B) Business(C) Others(D)	82 29 118 21	32.80 11.60 47.20 8.40	73 31 121 25	29.20 12.40 48.40 10.00	155 60 239 46	31.00 12.00 47.80 9.20
6	Income (P.M)	Below Rs.25,000 (A) Rs.25,001 – Rs.50,000 (B) Rs.50,001 – Rs.1 Lakh (C) Above Rs.1 Lakh (D)	42 112 53 43	16.80 44.80 21.20 17.20	22 122 67 39	8.80 48.80 26.80 15.60	64 234 120 82	12.80 46.80 24.00 16.40

Inference: In table 1, majority respondents in two hospitals fall under class B and also it is observed that majority (nearly 60%) of the respondents are male. Education background of the respondents in sample hospitals is below degree level and it is observed that urban

respondents are more than rural. It indicates that, the people residing in surroundings of the hospital are being attracted. When researchers probed into the income levels of the respondents, it is noticed that the majority respondents in both the hospitals belong to class B.

Part-2 Admission Process

Table 2: Patients perceptions towards admission process

SLNo	S4-44	APOLLO CARE		RE	
51.110	Statement	Mean	S.D	Mean	S.D
1	This hospital is providing admission with in short time.	31	12.80	53	21.20
2	The assistance to get admission in this hospital is good.		1.37	2.31	1.20
3	This hospital is following simple methods for collecting information from patients.	2.19		2.00	0.89
4	This hospital fee is nominal for admission.	2.00	0.89	2.48	1.19
5	This hospital conducting necessary tests before treatment.	2.38	1.27	2.48	1.11
6	This hospital charging extra fee for admission on holidays is reasonable.	2.30	1.27	2.69	1.09
7	The hospital admitted you as inpatient without any strong reason.	3.59	1.42	3.69	1.09
8	Recommendations are needed to get admission in this hospital.	4.50	0.50	4.20	0.87

Inference: From table 2, it can be said that the majority of patients in APOLLO said that they got admission without any difficulty in short span of time but low percentage of patients accepting same in CARE. Regarding the assistance while getting admitted and way of collecting information from patients, two hospitals are following simplified methods. On collecting extra fees for admission in holidays

majority of the patients in CARE opined it as not reasonable. It is noticed that the APOLLO is admitting the inpatients without strong reason and majority opined that recommendations are playing major role in getting admission. In nut shell, it is observed that the patients of two hospitals are satisfied towards admission process.

Comfort Facet

Table 3: Patient's perceptions on the comfort facet

CLN		APO	APOLLO		CARE	
Sl.No	Statement	Mean	S.D	Mean	S.D	
1	This hospital is providing accommodation immediately.	2.80	1.54	2.10	0.83	
2	The special room is better than a bed at general ward in this hospital.	1.80	0.87	2.58	1.27	
3	The rooms in this hospital are comfortable.	2.30	1.27	2.00	0.89	
4	This hospital is maintaining rooms in hygiene conditions.	2.30	1.27	2.00	0.89	
5	This hospital atmosphere is pleasant to stay.	2.30	1.27	2.00	0.89	
6	Doctors and nurses visit at regular intervals in this hospital.		1.08	1.80	0.87	
7	Doctors attend immediately on emergency conditions.		1.36	2.20	1.25	
8	No other disturbance at the hospital premises.	2.30	1.27	2.00	0.89	
9	You are satisfied with hospital for allowing relatives and visitors at any time.	2.30	1.27	1.80	0.60	
10	You are not satisfied with hospital for allowing relatives and visitors at fixed timings.	3.70 1.27		4.20	0.60	
11	Expenses in the hospital are moderate.	3.30	1.48	3.09	0.94	
12	The length of waiting time is comfortable in this hospital.	2.19	1.23	1.90	0.94	
13	A bed at general ward is better than special room in this hospital.	4.19	0.87	3.41	1.27	
14	Special rooms are reasonably priced in this hospital.	1.80	0.87	2.58	1.27	
15	You are satisfied with centralized patient services department in this hospital.	2.10	1.30	2.00	0.89	

Inference: According to the survey made, the large number of respondents in two hospitals is satisfied with the comfort facets, like comfort of rooms, maintaining hygienic conditions in rooms, maintenance of pleasant atmosphere. It is observed that the special rooms are better than general wards in APOLLO but not in CARE. In

APOLLO, most of the respondents are feeling that the expenses are moderate and also, opined that the prices of special rooms are reasonable. On the issue of waiting time, most of the respondents are feeling comfortable in CARE. On the whole, it can be said that the hospitals are giving importance to comfort facet (table 3).

Food Facilities

Table 4: Patient's perceptions towards food facilities

Sl. No	Statement		APOLLO		RE
		Mean	S.D	Mean	S.D
1	The food that is provided in the hospital is hygienic.	2.60	1.28	2.00	0.89
2	The food that is provided in this hospital is helpful for better recovery.	2.60	1.28	2.00	0.89
3	You will receive food in time.	1.69	1.00	2.20	1.25
4	The way of serving food to patients is good.	1.90	1.22	1.90	0.94
5	The dishes served in the canteen are good and tasty.	2.60	1.50	2.40	1.20
6	The canteen is within the proximity of the hospital.	1.79	1.17	1.90	0.95

Inference: From table 4, it can be concluded that the most of the respondents in CARE are accepting that the food providing at hospital is hygienic, useful for better recovery and pleased to be served on time. It is observed that the way

of serving food in APOLLO is better than that of CARE. Eventually one can say that the two hospitals are satisfying the patients with the food facilities in spite of number of problems.

Care Facet

Table 5: Patient's perceptions towards care

CI N-	Statement	APOLLO CARE			RE
Sl. No	St. No Statement		S.D	Mean	S.D
1	The arrangements to call the nurses in this hospital are good.	2.31	1.20	2.30	1.28
2	Telephone facilities are good in this hospital.	1.90	0.94	2.10	1.03
3	Facilities provided in this hospital for calling nurses and doctors in emergency conditions are good.		1.20	2.30	1.28
4	This hospital personnel are cheerful and hospitable.		1.37	1.80	0.98
5	Hospital personnel explain about treatment that the patients going to adopt.		1.43	1.59	0.91
6	This hospital provides updated information about progress of patient's health regularly.		0.89	2.11	1.31
7	You're satisfied with hospital management for pleasant stay arrangements.		1.27	2.00	0.89
8	This hospital doctors and nurses showing patience while listening to your problems.	2.20	1.33	2.11	1.31
9	This hospital doctors giving suggestions at the time of discharge.	1.69	1.00	2.00	0.89
10	You're comfortable when the tests are being conducted in this hospital.	2.19	1.46	2.39	1.36
11	Physical therapy is being provided for speedy recovery in this hospital.	2.68	1.10	2.39	0.91
12	This hospital employees demand illegal gratification tips.	4.30	0.47	4.11	1.12
13	You're satisfied the cleanliness of the hospital.		1.08	2.00	0.89
14	This hospital is conducting unnecessary tests as a part of treatment.		1.27	3.52	1.11
15	You're satisfied with friendly nature of the doctors/nurses and staff of this hospital.	2.10	1.37	1.80	0.98

Inference: The perception of patients about Care Facet reveals that the two hospitals are getting majority respondents acceptance on behavior of hospital personal. In providing updated information about the progress of patient's health, CARE is having better support than the APOLLO. Further it is noticed that in CARE, limited number of respondents complained that the staff demanding illegal gratification tips. Most of the respondents in

APOLLO and Care are satisfied with arrangements made for pleasant stay. Very nominal percentage of respondents said that there are no facilities to call the nurses in emergency conditions. In two hospitals, patients are happy on the doctor's behavior and their friendly nature. Limited number of patients in two hospitals stated that the hospitals were conducting unnecessary tests (table 5).

Functioning of Business Office

Table 6: Patient's perceptions about functioning of business office

Sl. No	St. A	APOLLO (CAR	CARE	
51. 140	Statement	Mean	S.D	Mean	S.D	
1	Finalization of bill easy process in this hospital.	2.31	1.43	2.40	1.20	
2	This hospital gives information regarding expenditure in advance.	2.40	1.43	1.59	0.91	
3	Billing procedure is complicated in this hospital.	3.68	1.43	3.60	1.20	
4	The procedure for grievance handling in this hospital is good.	2.20	1.33	2.11	1.31	
5	The hospital staffs are cooperative.	1.70	0.47	1.88	1.12	
6	You're satisfied with the overall performance of this hospital business office.	1.59	0.80	2.20	1.25	

Discharge Procedures

Table 7: Patient's perceptions towards discharge procedures

Sl. No	S4_4	APOLLO		CAR	CARE	
	Statement	Mean	S.D	Mean	S.D	
1	Discharging procedure is simple in this hospital.	2.60	1.29	2.50	1.37	
2	There are some hassles while discharging.	3.38	1.29	3.49	1.37	
3	It takes long time to get discharge after the doctor concerned.	3.40	1.20	3.59	1.19	
4	You will suggest this hospital to others.	1.80	0.74	1.71	0.66	

Inference: From the above discussion, it can be said that the majority of respondents in APOLLO accepted that the billing procedure is easy. In CARE, high percentage of respondents stated that the hospital authorities are giving information about the expenditure of treatment. It is observed that the two hospitals have good grievance procedures. In APOLLO limited number of respondents complained that the hospital staff is not cooperative. In essence, majority of respondents in two hospitals are satisfied with the functioning of business office (table 6).

Inference: It is observed that the respondents are satisfied with the discharge procedures of the sample hospitals. The majority of the patients accepted to suggest these hospitals to the needy. It is observed that the discharge procedure in APOLLO is simple. In two hospitals very limited number of respondents complained that there are some hassles while discharging and also taking long time to discharge. On the whole it can be understood that the two hospitals having simple discharge procedures (table 7).

Patients Perspective towards Effectiveness of Service Delivery

Table 8: Patient's perceptions towards service delivery

Sl. No	Particulars	APOI	LO	CARE	
		Mean	S.D	Mean	S.D
1	Admission process	2.57	0.50	2.70	0.42
2	Comfort facet	2.53	0.69	2.37	0.41
3	Food Facilities	2.21	0.76	2.02	0.64
4	CARE facet	2.48	0.61	2.39	0.49
5	Business Office performance	2.31	0.64	2.29	0.54
6	Discharge procedures	2.79	0.66	2.82	0.57

Inference: The above six dimensions are positively opined in two sample hospitals. On a 5 point scale indicating performance of the hospital in six dimensions of the sample hospitals is agreeable. From the values given in the table the perceptions of the patients towards admission process; comfort facet, food facilities, care aspects, functioning of business office and discharge procedures reveal that the patients are giving importance to all the aspects in getting the satisfaction (table 8).

Testing of Hypotheses

The responses from the patients on the performance are collected under six heads of

items (satisfaction influencing factors) namely Admission process, Comfort facet, Food facilities, Care facet, Performance of business office and Discharging procedures in both the hospitals. The average scores across the patients for the questions are analyzed with the help of one-way ANOVA to know the distinction in the response between the performance indicators.

APOLLO

The null hypothesis is framed as "The perceptions of the patients are indistinguishable with respect to the performance indicators of APOLLO hospital"

Table 9: ANOVA classification on effectiveness of service delivery in APOLLO

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	1.182	5	0.236	0.450	0.811
Within Groups	26.777	51	0.525		
Total	27.960	56			

Table 10: ANOVA classification on effectiveness of service delivery in CARE

	Sum of Squares	df	Mean Square	F	Sig.
Between Groups	2.509	5	0.502	1.042	0.403
Within Groups	24.553	51	0.481		
Total	27.062	56			

Table 9 representing the ANOVA one-way classification of patients opinion on effectiveness of service delivery like Admission procedure, Comfort facet, Food facilities, Care facet, Functioning of business office and Discharge procedures in APOLLO hospital show at 5% level of significance the null hypothesis is accepted.

CARE

The null hypothesis is framed as "The perception of the patients are indistinguishable with respect to the performance indicators of CARE hospital"

Table 10 representing the ANOVA one-way classification of patients opinion on effectiveness of service delivery like Admission procedure, Comfort facet, Food facilities, Care facet, Functioning of business office and Discharge procedures in CARE hospital show at 5% level of significance the null hypothesis is accepted.

CONCLUSION

A critical challenge for health services in developing in developing countries is to find ways to make them more patient-oriented. Indifferent treatment of patients, unofficial payments to providers, lack of patient privacy and inadequate provision of medicines and supplies are common, yet are rarely acknowledged by traditional quality assessment methods. The main beneficiary of a good healthcare system is clearly the patient. Customers who are not satisfied often do not come back and they may not recommend to others. The long-term survival of hospitals depends on loyal patients who come back or recommend the hospitals to others. There are various factors which influence customer's

expectations of service. They include efficiency, confidence, helpfulness, personal interest, reliability. These are intrinsic factors. They influence the response of the hospital staff to the patient and his relatives. They can be improved by training when the performance does not reach the set of standards, in APOLLO performance indicators like Admission process, Comfort facet, Food facilities, Care facet, Functioning of business office and Discharge procedures are equally strongly agreeable in the opinion of patients. Similarly the performance indicators for CARE also do not differ significantly i.e. in the opinion of patients the performance of both hospitals is equally satisfactory and strong.

Appendix History of Sample Hospitals APOLLO

APOLLO located in Jubilee Hills, Hyderabad is a 550-bed tertiary care centre, with 95% of occupancy rate. It has over 50 medical and surgical disciplines, spread over a campus area of 35 acres with built-up area of 190,000 square feet. Its services are supported by sophisticated experienced technology and medical professionals. The average staffs to patient ratio for the hospital is 3:1 with a 1:1 ratio prevailing in priority areas like the Intensive care Unit and the Cardiac care Unit. APOLLO Hospital handles close to 100,000 patients a year. International patients from Tanzania, the USA, the UAE, Kenya, Oman and neighboring Asian countries are treated by the hospital. APOLLO Hospital is established with a mission of bringing healthcare of international standards within the reach of every individual and to maintain excellence in education, research and healthcare for the benefit of humanity.

Hyderabad APOLLO Hospital is recognized by over one hundred organizations in public as well as in private sectors.

CARE

The CARE Group of Hospitals owned by Quality CARE India Limited (QCIL) situated in Bangara Hills, Hyderabad is a 200- bed multispecialty hospital. CARE Hospital, The Institute of Medical Sciences is the flagship Hospital of CARE Group, comprises with contemporary accommodation facilities ranging from general wards to super deluxe rooms. With the presence of more than 127 specialist physicians, the Hospital provides specialty medical services. The Hospital is equipped with state of art equipment and has 10 operating Rooms catering around 400 cardiothoracic surgeries and 1000 non cardiac surgeries annually. The hospital is working with a mission of providing the best and cost effective care, accessible to every patient through integrated clinical practice, education and research. CARE is recognized by many organizations both in public and private sectors.

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