Changing Patients Perception towards Private Hospitals

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ABSTRACT

This article begins by defining the perception of the patients. It then proceeds to describe and discuss patient perception about various basic facilities as well as other facilities such as- Emergency services, Reliability, Responsiveness, Assurance, and Empathy. The article explains that the overall conditions prevailing in the study area with respect to medical services are not conducive to the quality and affordable medical care in the interest of patients. Private hospitals are clearly demonstrated both the laxity of the concerned authorities and unconcern of the medical profession for proper standards and quality of care for treatment of patients.

Keywords: - Emergency services, Reliability, Responsiveness, Assurance, Empathy

I. INTRODUCTION

Patient’s perception is an important component of relationship with the patient. Perceptions vary from person to person. Different people perceive different things about the same situation. But more than that, we assign different meanings to what we perceive and the meanings might change for a certain person. One might change one’s perspective or simply make things mean something else. The concept of patient perception does not only relate to individual patient in private hospitals.

II. OBJECTIVES

- To know services provided by Private Hospitals.
- To study the changing pattern of perception of patient towards private hospitals.

1. Scope:

Geographical Scope:-
Geographical Scope is limited to Private Hospitals in Islampur City.

Conceptual Scope:-
Conceptual Scope is changing patient’s perception towards private hospitals.

1) Limitations:

- Only Private Hospitals are taken from Islampur City for present study.
  - Only 100 Patient taken for study.

2. Research Methodology:

- Primary Data (Proportionate Sampling Method)
- Secondary Data (News Papers, Different NHS Report)

1. BASIC ASPECTS:

Satisfaction: - What is your opinion about following Basic Facilities?
### Table No.: - 1.1

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Basic Facilities</th>
<th>Very Good</th>
<th>Good</th>
<th>Average</th>
<th>Poor</th>
<th>Very poor</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Room (size, layout, Outlook)</td>
<td>30</td>
<td>20</td>
<td>15</td>
<td>15</td>
<td>20</td>
</tr>
<tr>
<td>2</td>
<td>lighting &amp; ventilation</td>
<td>40</td>
<td>25</td>
<td>10</td>
<td>10</td>
<td>15</td>
</tr>
<tr>
<td>3</td>
<td>Lockers, Stools, Urine pot, Spittoons per bed</td>
<td>35</td>
<td>30</td>
<td>15</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>4</td>
<td>Sanitary (Bathroom, Toilet, Washbasin)</td>
<td>30</td>
<td>35</td>
<td>10</td>
<td>9</td>
<td>16</td>
</tr>
<tr>
<td>5</td>
<td>Regular Power Supply</td>
<td>30</td>
<td>20</td>
<td>10</td>
<td>30</td>
<td>10</td>
</tr>
<tr>
<td>6</td>
<td>Facilities to attendant – eating &amp; sleeping</td>
<td>40</td>
<td>15</td>
<td>10</td>
<td>20</td>
<td>15</td>
</tr>
<tr>
<td>7</td>
<td>Regular &amp; Clean Drinking Water</td>
<td>45</td>
<td>10</td>
<td>10</td>
<td>15</td>
<td>20</td>
</tr>
<tr>
<td>8</td>
<td>Employee Appearance</td>
<td>40</td>
<td>20</td>
<td>20</td>
<td>15</td>
<td>5</td>
</tr>
<tr>
<td>9</td>
<td>Bed and Linen</td>
<td>38</td>
<td>35</td>
<td>20</td>
<td>7</td>
<td>0</td>
</tr>
<tr>
<td>10</td>
<td>Canteen</td>
<td>40</td>
<td>20</td>
<td>20</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>11</td>
<td>Overall Cleanness</td>
<td>36</td>
<td>25</td>
<td>20</td>
<td>11</td>
<td>8</td>
</tr>
</tbody>
</table>

(Source: Primary Data)

### Graph No. 1.1

- Room (size, layout, Outlook)
- lighting & ventilation
- Lockers, Stools, Urine pot, Spittoons per bed
- Sanitary (Bathroom, Toilet, Washbasin)
- Regular Power Supply
- Facilities to attendant – eating & sleeping
- Regular & Clean Drinking Water
### 1.2 OTHER ASPECTS

**Satisfaction: - What is your opinion about following other facilities?**

#### Table No. 1.2

<table>
<thead>
<tr>
<th>Sr. No</th>
<th>Variable</th>
<th>Delighted</th>
<th>More Than Satisfied</th>
<th>Satisfied</th>
<th>Less Than Satisfied</th>
<th>Disgust</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Emergency services</td>
<td>30</td>
<td>20</td>
<td>15</td>
<td>35</td>
<td>0</td>
</tr>
<tr>
<td>2</td>
<td>Reliability</td>
<td>30</td>
<td>30</td>
<td>20</td>
<td>10</td>
<td>10</td>
</tr>
<tr>
<td>3</td>
<td>Responsiveness</td>
<td>45</td>
<td>25</td>
<td>10</td>
<td>15</td>
<td>5</td>
</tr>
<tr>
<td>4</td>
<td>Assurance</td>
<td>42</td>
<td>35</td>
<td>20</td>
<td>3</td>
<td>0</td>
</tr>
<tr>
<td>5</td>
<td>Empathy</td>
<td>39</td>
<td>28</td>
<td>10</td>
<td>13</td>
<td>10</td>
</tr>
<tr>
<td>6</td>
<td>Affordability</td>
<td>5</td>
<td>15</td>
<td>10</td>
<td>45</td>
<td>25</td>
</tr>
<tr>
<td>7</td>
<td>Claim Settlement</td>
<td>40</td>
<td>25</td>
<td>20</td>
<td>10</td>
<td>5</td>
</tr>
<tr>
<td>8</td>
<td>Beneficiary of various Scheme</td>
<td>43</td>
<td>21</td>
<td>20</td>
<td>12</td>
<td>4</td>
</tr>
<tr>
<td>9</td>
<td>Post hospitalised treatment</td>
<td>38</td>
<td>29</td>
<td>20</td>
<td>10</td>
<td>3</td>
</tr>
<tr>
<td>10</td>
<td>Medicine facility</td>
<td>48</td>
<td>15</td>
<td>25</td>
<td>10</td>
<td>2</td>
</tr>
</tbody>
</table>

(Source: Primary Data)

#### Graph No. 1.2
III. FINDINGS

It is found that basic facilities like lighting and ventilation, facilities to attendant and employee appearance are very good i.e. 40%. It is also found that basic facilities provided by the private hospitals are good. Without providing these basic facilities, the private hospitals are not survived in the cut-thought competition. So they are provided basic facilities better than better.

It is found that other facilities like medicine facility (48%), responsiveness (45%), and claim settlement (40%) are also provided by the private hospitals in the good manner. Researcher has also observed those patients are satisfied with services like Reliability, Emergency services, Responsiveness, Assurance, Empathy, Claim Settlement, Beneficiary of various Schemes; Post hospitalized treatment, Medicine facility.

IV. SUGGESTIONS

It is suggested that private hospitals should minimize their rates so as to affordable for common man.

It is suggested that all private hospital should accepted schemes like-MJPJAY Scheme - Rajiv Gandhi Jeevandayee Arogya Yojana for survival of poor patient.

CONCLUSION

It is concluded that, the physical infrastructure and the resources made available necessary for providing quality medical services are grossly adequate in almost all Private hospitals. To sum-up, the finding are self explanatory and reflects the existing reality in the study area with respect to medical services making it clear that there are smooth functioning of the private hospitals.

The overall conditions prevailing in the study area with respect to medical services are conductive to the quality and affordable medical care in the interest of patients. There are efficient hospitals in the study area.

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