Chapter VII
CHAPTER -VII
SUMMARY OF FINDINGS, SUGGESTIONS AND CONCLUSION

INTRODUCTION

The study aimed at finding the level of satisfaction among the Patients’ and the opinion of service providers on the Service quality of public hospitals. For the purpose of this study, 600 Patient respondents and 600 respondents of service providers were selected. First-Hand information was collected from six hundred sample respondent. The primary data was collected through the field survey method. For collecting the data, a well-structured questionnaire was used as a main tool. The data thus collected were arranged and tabulated systematically and appropriate statistical tools were used for data analysis. In this Chapter, an attempt was made to recapitulate the key findings and the conclusion. Based on the findings a few suggestions have also been made for the betterment of quality of health care.

7.1. FINDINGS

1) It was found from the study that 49.30% of the patient respondents were in the age group 21-40 years has perceived maximum level of satisfaction in utilizing the public health care facilities.

2) It was found from the study that 56% of the female patient respondents have perceived the maximum level of satisfaction from patient care facilities.

3) Respondent’s Monthly income was studied and it was found that the respondents who have earned the monthly income of below Rs 10,000 perceived the (96%) maximum level of satisfaction than respondents who have earned Rs10, 000 and above per month.
4) Education-wise analysis reveals that the respondents having school level education have perceived (69%) maximum level of satisfaction in utilizing the facilities available and the services offered in government hospitals.

5) It was found from the study that 75% of the patient respondents’ occupation was incumbent of private sector, and they have perceived the maximum level of satisfaction from patient care facilities.

6) Respondents’ place of residence was studied and it was found that the respondents living in the rural area have perceived (85%) maximum level of satisfaction than those in the urban areas.

7) It was learnt from the analysis of family size of the respondents having less than 3 members in the family have perceived (70%) maximum level of satisfaction in utilizing the facilities available and the services offered in government hospitals when compared those with family size of 3-6 and above 6 members.

8) Respondents’ wealth was studied and it was found that the respondents who earned below Rs 15,000 have had the maximum (95%) level of satisfaction.

9) It was found from the study that 43% of the patient respondents who had high Awareness on hospital services had experienced maximum level of satisfaction.

10) It is found from the analysis that the respondents’ having poor Rate on dietary services had the maximum (39%) satisfaction.

11) The respondents opined that the Rate on lab equipment services was Fair Rate, which was represented by (39%) of the respondents.
12) Rate on emergency services was studied and it was found that respondents who had paid Fair Rate on emergency services have had the maximum level of satisfaction.

13) Rate on infrastructural facilities was studied and found that the respondents who had paid Fair Rate on infrastructural facilities have perceived the maximum (42%) level of satisfaction.

14) The price at medical store services was studied and it was found that the respondents who had paid Fair Rate on medical store services had perceived the maximum level of satisfaction.

15) The common problem faced by respondents in general was studied and it was found that out of 8 problems, problems like waiting time to receive the medical treatment was ranked as the major problem, and more procedural formalities for registration was ranked in the following. The other problems such as lack of availability of latest equipment and non-adopting the latest treatment and the old style of diagnosing were ranked in the third and fourth positions respectively.

16) It was found from the study that 63.5% of the patient respondents were aware of the health related camps conducted by the government hospitals.

17) It was found from the study that 59% of the patient respondents were aware of prevention programmes.

18) The study reveals that 60% of the patient respondents preferred to have membership schemes.

19) It was learnt from the study that 61% of the patient respondents preferred to have the Medical insurance.
20) It is identified from the study that 61.3% of the patient respondents were aware of Advertising

21) It was found from the study that 69% of the patient respondents were not aware of communication from hospitals after treatment.

22) It is divulged from the study that 56% of the patient respondents were not satisfied with the ambulance services.

23) The study reveals that 60% of the patient respondents were satisfied with the accessibility of the hospitals from their homes.

24) It was found from the study that 51.8% of the patient respondents did not prefer the marketing strategies practiced in the private hospital sectors.

Service providers’ findings

25) It was identified from the study that 67% of the respondents have said that Semi urban areas are the ideal location for rendering a good hospital’s services.

26) The study reveals that all the 600 sample respondents prefer government organization.

27) It is revealed from the study that 63.6% of respondents opined that the hospitals requires more than Rs100 crores to rejuvenate with the latest equipment and separate buildings.

28) It could be learned from the study that the 67% respondents had up to 10 years experience

29) Factor analysis reveals that out of 15 variables, the factors were reduced to 5 variables which are most important to assess the quality measures of public hospitals services. They are management’s expectations, way of understanding,
expectation of patients, translating knowledge of patient’s expectation into quality, specification and standards, strict adherence for guidelines and specification for service provisions and delivery, effective communications to the patients in clearly way in the local Tamil language and mapping the cycle of patients moments of truth.

7.2. SUGGESTIONS

1) The study revealed that the 41-70 years age groups of patients were not satisfied with the patient care facilities in Trichy District. Hence, it is suggested that appropriate Steps should be taken by government and service providers to satisfy the patients of various age groups.

2) Dietary services are an important factor in determining the quality of services. It was found from the study that the majority of the respondents were not satisfied with the present quality on dietary services. Efforts should be taken by the service providers and decision makers to improve dietary services to meet the demands of public.

3) The Majority of the service utilizers reveal that it is difficult to have the equipment facilities. Considering the importance of lab equipment services for utilizers’, government should ensure that laboratory should have high technology enabled equipments in all hospitals and the patients without hardship.

4) Majority of the patients find it hard to get emergency services in serious situations and on the other hand, they are unable to find service providers for
treatment. Effort should be taken by service providers and regulating bodies to narrow this gap.

5) It was found from the study that the infrastructural facilities of a hospital played a vital role in the patients care facilities. Hospital can attract by providing clean & neat environment. It enhances their performance along with the expectations of the patients

6) It was found from the study that the existing rate in the Medical store was high. Hence it is suggested that the Hospitals can attract the patients by providing low cost and high quality medicines. It helps to enhance quality along with the expectations of patients.

7) The study revealed that waiting time to get the medical treatment was too high, and procedural formalities for registration took more time. Hence, it is suggested that queuing model may be introduced to avoid unnecessary waiting time and registration should be made simple.

8) The government hospitals are still adopting the old technology for diagnosing the diseases and at many times the doctors ask the patients to get the test reports from the private laboratories’ or private hospitals. Hence, it is suggested that latest hi-tech machineries and equipments should be provided in the government hospitals.

9) Majority of the patients do not have awareness of the camps conducted by the authorities of government hospitals. This can be addressed by the active involvement of service providers, government and social welfare officials as each of them have a unique role to eliminate communicable diseases.
10) The study revealed that patients are not aware of prevention programmes. Because prevention is better than cure, necessary steps should be taken by the medical department and health department authorities to create awareness on prevention schemes of patient care facilities in Trichy.

11) Patient satisfaction has to be used as an effective instrument for raising the quality of hospitals. Hence, high standard with cleanliness and hygiene should be practiced in the hospitals. New medical insurance schemes have to be offered to meet Patients varying needs.

12) It is witnessed from the analysis that patient respondents were not satisfied with the ambulance service. This has deteriorated the quality of patient care facilities. Hence, service providers should concentrate on providing an ambulance service as operated in the cities like 108 life saving ambulance facilities.

13) Finance should not be a constraint for the development of patient care facilities. A good number of service providers felt that sufficient government funding is not available for patient care facilities. Purchase of latest equipment and creation of separate buildings is the order of the day, but that should not be an excuse for insufficient government funding as state funding is absolutely essential for an inclusive development of patient care facilities.

7.3. CONCLUSION

The health of a nation is an essential component of development, vital to the nation’s economic growth and internal stability. Assuring a minimal level of health care to the population is a critical constituent of the development process. Since Independence, India has built up a vast health infrastructure and health personnel at
primary, secondary, and tertiary care in public, voluntary, and private sectors. For producing skilled human resources, a number of medical and paramedical institutions including Ayurveda, Yoga and Naturopathy, Unani, Siddha, and Homeopathy (AYUSH) institutions have been set up. Considerable achievements have been made over the last six decades in our efforts to improve health standards, such as life expectancy, child mortality, infant mortality, and maternal mortality.

The importance of providing quality health care to public enable access to affordable and reliable health services cannot be underestimated. This is specially so, in the context of preventing the non-poor from entering into poverty or in terms of reducing the suffering of those who are already below poverty line. The country has to deal with rising costs of health care and growing expectations of the people. The challenge of quality health services in remote rural regions has to be urgently met. Given the magnitude of the problems’ we need to transform public health care into an accountable, accessible, and affordable system of quality services.

The challenge is to provide these areas with access to low-cost public health interventions such as universal immunization services and timely treatment. Public health care system in rural areas in many States and regions is in shambles. Population projections postulate that slum growth is expected to surpass the capacity of civic authorities to respond to their health and infrastructure needs.

For quality health service, development and utilization of appropriate technologies for diagnosis and treatment of diseases is essential. Over the last few
years, health-related technology has developed at a rapid pace. But its impact on indices of public health has been minimal. There is a need to develop cheaper technologies that are as effective as the existing ones. Many technologies are expensive, so alternatives are badly needed. It should be of prime concern to find technological solutions for making crucial equipment affordable, especially, for anaesthesia machine, surgical equipment and lighting, sterilization equipment, defibrillator, ventilator, electrocardiogram (ECG), blood pressure monitoring equipment, pulse oxymeter. Benefits of reduced cost of such technologies should reach village health care providers. Efforts will be made to promote public health related technologies. Health Management Information System (HMIS) would be an important new initiative utilizing developments in the field of IT.

A computerized web enabled data capturing and analytical system will be established to provide valid and reliable data and reports for use at all levels. Appropriate use of IT for an enhanced role in health care and governance will be aimed. It is feasible to set up a National Grid (service through satellite) to be shared by health care providers, trainers, beneficiaries, and civil society. Telemedicine could help to bring specialized health care to the remotest corners of the country. Telemedicine is likely to provide the advantages of Tele diagnosis, especially, in the areas of cardiology, pathology, dermatology, and radiology besides Continuing Medical Education (CME). It will be of immense use for diagnostic and consultative purposes for patients getting treatment from the secondary level healthcare facilities. The efficacy of telemedicine has already been shown through the network established by the
Indian Space Research Organization (ISRO) that has connected 42 super-specialty hospitals with 8 mobile telemedicine vans and 200 rural and remote hospitals.

The Tamilnadu government has issued a new health insurance scheme to government employees but the private hospitals rejecting to claim the insurance amount. The denial of the claim is due to restricted diseases listed in the schedule. Hence, it is suggested that the health insurance scheme should cover all the diseases including a new undiscovered diseases.

Dietary services are an important factor in determining the quality of services. It was found from the study that the majority of the respondents were not satisfied with the present quality on dietary services. Efforts should be taken by the service providers and decision makers to improve dietary services to meet the demands of the public. The majority of the service utilizers reveal that it is difficult to have the equipment facilities. Considering the importance of lab equipment services for utilizers’, government should ensure that laboratory should have high technology enabled equipments in all hospitals and the patients without hardship. It was found from the study that the infrastructural facilities of a hospital played a vital role in the patients care facilities. Hospital can attract by providing clean and neat environment. It enhances their performance along with the expectations of the patients. It was found from the study that the existing rate in the Medical store was high. Hence, it is suggested that the Hospitals can attract the patients by providing high quality medicines at low cost, especially for cardiac and paralysis attack. It helps to enhance the quality along with the expectations of patients. The analysis revealed that waiting time to get
the medical treatment was too high, and procedural formalities for registration took more time. Hence, it is suggested that queuing model may be introduced to avoid unnecessary waiting time and registration should be made simple.

The government hospitals are still adopting the old technology for diagnosing the diseases and at many times the doctors ask the patients to get the test reports from the private laboratories’ or private hospitals. Hence, it is suggested that the doctors should approach the Chief Minister through the local Ministers to purchase and launch the latest hi-tech machineries and equipments in the government hospitals. The study has given a few suggestions and recommendations to maintain the quality health care system and the government for the betterment of service quality. It should be a privilege for the researcher if this research initiated further research on this topic on national importance. The present research is a rewarding exercise to the scholar. The researcher will be delighted, if the suggestions are incorporated by the policymakers in the government hospitals and the top officials in the Ministry of Health.
7.4. SCOPE FOR FUTURE RESEARCH

1) This study has been made on service quality of public hospitals sector therefore the service quality of Private and corporate hospitals have been studied for future.

2) This study is being concentrated only Multi specialty services so in future they use Primary and secondary care services.

3) Future research can be conducted in BHEL and ponmalli railway hospital (which is under the control of Indian government) has not been covered under the study.

4) This study reveals only the service quality of public sector hospital in trichy District; therefore, other District in TamilNadu can be taken up by future researchers.

5) The researcher concentrated only on 5 models of parasuram thoughts. The remaining models can be taken for future study.