A Comparative Study of Service Quality and Patient Satisfaction in Hospitals of Lucknow

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ABSTRACT

Hospital service quality significantly impacts patient satisfaction and health outcomes. However, variations in service quality across hospitals can lead to disparities in patient care. This study aims to evaluate the differences in service quality among hospitals, assess the effectiveness of quality improvement programs, identify factors influencing service quality, and examine patient satisfaction in various aspects of care. The goal is to offer evidence-based recommendations for improving healthcare services and patient experiences. The study employed a mixed-methods approach. Quantitative data were collected through patient satisfaction surveys from 320 patients across 10 hospitals in Lucknow, including both public and private facilities, evaluating various aspects of care. Qualitative interviews were conducted with hospital staff and administrators to explore key factors determining service quality. Hospital records were analysed to assess the effectiveness of quality improvement initiatives. Statistical analysis was used to compare service quality and patient satisfaction across the hospitals. The findings indicate significant differences in service quality across hospitals of Lucknow. Factors such as staffing levels, resource allocation, and infrastructure were key determinants of service quality. Some hospitals demonstrated higher patient satisfaction due to the successful implementation of quality improvement programs, while others showed gaps in service delivery. This study reveals important disparities in hospital service quality and identifies effective quality improvement programs. The findings are used to propose evidence-based recommendations aimed at enhancing service quality and improving patient satisfaction, contributing to better overall healthcare outcomes.

Keywords-Service quality, patient satisfaction, Performance

INTRODUCTION

In today's competitive healthcare environment, service quality significantly impacts patient satisfaction and overall health outcomes. Service quality dimensions, such as tangibles, reliability, responsiveness, assurance, and empathy, are essential in shaping the patient's experience (Parasuraman, Zeithaml, & Berry, 1988). Studies indicate that effective service quality contributes to patient satisfaction, loyalty, and improved health outcomes, whereas deficiencies in quality can lead to patient dissatisfaction, lower hospital utilization rates, and negative health impacts (Andaleeb, 2001; Ahmed, 2019).

Lucknow, as a prominent healthcare centre in India, comprises various public and private hospitals with distinct operational structures. These hospitals demonstrate variations in infrastructure, staffing, and quality of care, resulting in differences in patient satisfaction and service standards (Kaur & Sharma, 2018). Understanding these disparities provides an opportunity to identify gaps in service quality that impact patient experiences and healthcare outcomes.

While quality improvement initiatives are implemented in several Lucknow hospitals, their effectiveness in enhancing patient satisfaction requires further assessment. Quality improvement programs may include process optimization, staff training, and patient-centred care approaches (Thakur & Mehta, 2020). Determining which of these initiatives are effective is critical in understanding how hospitals can improve patient outcomes.

The **objectives** of this study are to: (1) assess variances in service quality among hospitals in Lucknow to identify disparities or standards of excellence; (2) evaluate the effectiveness of quality improvement initiatives; (3) examine factors that influence service quality, such as staffing and infrastructure; (4) analyse patient satisfaction levels concerning various aspects of care; and (5) formulate evidence-based recommendations to improve service quality and patient satisfaction.

Materials and Methods

Study Area: Hospital from Central, North, South, East & West Zones of Lucknow.

Lucknow, the capital of Uttar Pradesh, hosts diverse healthcare facilities, including government and private hospitals. This study focuses on a representative sample of hospitals in Lucknow to examine variations in service quality & includes patients from both public and private healthcare facilities to capture a broader perspective of patient satisfaction across different healthcare settings

Sample Size and Sampling Technique

The study included a total of 320 patients drawn from 10 hospitals in Lucknow, comprising both public (n = 150) and private (n = 170) healthcare facilities located across the Central, North, South, East, and West zones of the city. A convenience sampling technique is used to recruit patients who had completed their consultation or treatment and consented to participate during the data collection period. Patients aged 18 years and above were included, while critically ill patients and those unwilling to participate are excluded. The inclusion of respondents from multiple hospitals and healthcare settings allowed for a reasonable representation of patient perspectives on service quality and satisfaction.

Variance in Service Quality between Hospitals

Hospitals are categorized as public, private, or specialty based on infrastructure, services, and staffing. Differences in service quality are assessed across these categories using the SERVQUAL model.

Factors Determining Service Quality

Service quality was analysed based on the following:

- **Staffing Levels**: Sufficient and qualified personnel for quality service.

- **Resource Allocation**: Availability of medical equipment and drugs.

- **Infrastructure**: Physical facilities, technology, and cleanliness.

- **Organizational Policies**: Quality control and patient-centred care policies.

Patient Satisfaction on Aspects of Care Provided

Patient satisfaction is measured through surveys, assessing dimensions like wait times, staff behaviour, communication, empathy, and responsiveness.

Data Analysis

Statistical Analysis

Descriptive statistics is used to summarize survey responses. ANOVA tested for differences in service quality across hospital types, and correlation analysis identified associations between service quality factors and patient satisfaction.

Spatial Analysis

Geographic Information System (GIS) tools mapped hospital distribution and accessibility in Lucknow, offering insights into how location impacts patient satisfaction.

Qualitative Analysis

Interviews with hospital administrators provided qualitative insights into the effectiveness of quality improvement initiatives and hospital-specific challenges.

RESULTS

Variance in Service Quality across Hospitals

Results indicated significant differences in service quality between public and private hospitals, with private facilities generally scoring higher on tangibles, reliability, and responsiveness. Public hospitals showed gaps in resource allocation and infrastructure.

Effectiveness of Quality Improvement Programs

Private hospitals demonstrated moderate success with quality improvement programs, while public hospitals faced constraints, particularly in staffing and resource availability.

Determinants of Service Quality

Key factors influencing service quality included staffing adequacy, resource availability, and infrastructure. Private hospitals tended to invest more in infrastructure and staff training, whereas public hospitals often faced limitations.

Patient Satisfaction with Aspects of Care

Patient satisfaction is positively correlated with factors such as responsiveness and empathy. In public hospitals, patients expressed dissatisfaction primarily with waiting times and cleanliness, while private hospital patients reported high satisfaction with personalized care and quick service.

DISCUSSION

The findings reveal substantial disparities in service quality across hospitals in Lucknow, reflecting systemic issues, especially within public hospitals. The lack of adequate staffing and resources in public hospitals contributed to lower service quality and patient dissatisfaction. Meanwhile, private hospitals' investment in infrastructure and service training correlated with higher patient satisfaction.

Quality improvement initiatives have shown varying effectiveness across facilities. The success of these programs often depends on organizational commitment and resource availability. For instance, private hospitals implemented staff training and patient-centered care models more effectively, while public hospitals faced challenges due to budgetary constraints.

This study aligns with previous research highlighting the importance of infrastructure, resource allocation, and staffing in achieving patient satisfaction (Rahman & Rahman, 2022). The disparities observed underscore the need for targeted improvement programs, especially in resource-limited public hospitals, to ensure equitable healthcare delivery.

LIMITATIONS

This study has certain limitations. The use of a non-probability sampling technique may limit the generalizability of the findings. Although both public and private hospitals were included, patient satisfaction is measured using self-reported surveys, which may be subject to response bias. Future studies may employ probability-based sampling and objective service quality measures to strengthen generalizability. Additionally, patient satisfaction is assessed using self-reported questionnaires, which may be subject to response bias influenced by individual expectations or recent healthcare experiences.

CONCLUSION

The study concludes that significant disparities exist in service quality and patient satisfaction across hospitals in Lucknow, influenced by differences in resource allocation, staffing, and infrastructure.

Recommendations include enhancing resource allocation in public hospitals, refining staff training programs, and adopting patient-centred care models. Implementing these improvements can lead to better patient satisfaction and health outcomes, contributing to a more equitable healthcare system in Lucknow.

Future research including larger samples and probability-based sampling across diverse healthcare settings would further strengthen the generalizability of these findings.

The results of this study should serve as a guide for authorities as they prioritize staffing improvements and resource allocation in public hospitals.

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