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"IMPACT OF CONTINUOUS QUALITY IMPROVEMENT ON PATIENT (CUSTOMER) SATISFACTION IN MADHYA PRADESH HOSPITALS WITH SPECIAL REFERENCE TO JABALPUR DISTRICT"

DEEPAK SHARMA AND   GANGA DHAR DAS

Research Scholar, School of Management Studies,
Singhania University, Jhunjhunu, Rajasthan
Associate professor, Department Of Management B.H College, Howly,
Barpeta, Assam, India

Abstract:

Continuous Quality improvement is tool of success for any health care organization. It give the highly satisfaction to patients as well as help to increase the public trust on hospitals. In this analysis we have collected feedbacks by patients to assess the continuous quality improvement because patients received services directly from the healthcare organization. Most of the cases where significance of parameter was observed significant at 5% level of significance. In some cases it was observed insignificance. In most of the cases null hypothesis framed at beginning was thus refuted & alternative hypothesis have accepted. However the reason for some insignificance results may be attribute to less awareness of patients towards quality & continuous quality improvement. i.e. respondents are unaware of quality of services, which are the part of hospital responsibility and this study was not only concerning of one day activity, it included continuity of tasks performance. In this study we want to state that continuous quality improvement is routine quality procedures which is adopted by all the concerning staff /facility provided for a long span and respondents are selected for collecting feedbacks those whom have experience of long stay in hospitals whether they are from government, private or trust hospitals.

Thus if changes are incorporate through the improvement in the status result may turn up to be highly satisfied.

Thus on the basis of above discussion, it is recommended that emergent need to bring the changes in all the education system and there should include primary health topics, some necessary procedures information ,Trainings(like: BLS, Infection control etc), brief study of hospitals system, admission criterion and vital signs education. It is also recommended that government should make strict rules on quality system for hospitals & try for its centralization.

This study found that there is need of more improvement in government and trust hospitals quality, but in some areas of private hospitals also required improvement. So that desired outcomes may be obtain.

KEYWORDS:

patient satisfaction, odd ratio, continuous quality improvement, composite factors.

METHODOLOGY:

This study covers a sample of total 300 respondents feedbacks which include 100 feedbacks from government hospitals, 100 feedbacks from Private hospitals & 100 feedbacks from hospitals run by trusts. Survey was conducted at the Jabalpur during March 2012 -June 2012. Sampling is done by interviewing randomly from selected Patients(100 Private, 100 Government &100 Trust Hospitals) at different times differ from government hospitals of the day, on every day of the week, over a sixteen week period. A structured questionnaire was used for data collection. The questionnaire was divided into four sections, the first section reveals the demographic profile of respondents and second, third and fourth sections are designed to evaluate their overall experiences/Awareness they received from the Hospitals' quality. The questions were phrased in the form of statements scored on a 5-point Likert type scale, ranking from 1 "highly dissatisfied" to 5 "highly satisfied". Exploratory Factor Analysis issued for measuring hospitals continuous quality to determine the dimension of patients' satisfaction. Factor analysis is a general name denoting a class of procedures primarily used for data reduction and summarization. And log likelihood method is used for logistic regression analysis. Average score analysis is conducted to evaluate the different Hospitals' services. Service quality satisfaction has been analyzed on the basis of score assigned in the questionnaire, 5 marks is assigned to highly satisfied, 4 mark for satisfied, 3 mark for moderate, 2 mark for dissatisfied and 1 mark for highly dissatisfied. Pie-chart is prepared to check the patient's willingness to give the priority to different wards category. The variable and substances used in data collection is depicted in variable table.

DEMOGRAPHIC PROFILE OF RESPONDENTS:

In this study feedbacks were collected from different genders, age groups, Income levels, professions & their qualification which can help in different angles of opinion. Their frequency & percentage are given below (Table:1 & Graph 1,2,3,4,5)

PROFILE	SUB PROFILE	FREQUENCY	PERCENTAGE
Gender	Male	176	58.67%
	Female	124	41.33%
Age	18-25	53	17.67%
	26-35	62	20.67%
	36-50	63	21.00%
	50-64	71	23.67%
	65above	51	17.00%
Income level	0-1L	156	52.00%
	2L-4L	99	33.00%
	5 & above	45	15.00%
Profession	Business	78	26.00%
	Private	101	33.67%
	Government	32	10.67%
	Others	89	29.67%
Education	Secondary	44	14.67%
	UG	89	29.67%
	Diploma	35	11.67%
	PG & Doctorate	86	28.67%
	Others	46	15.33%

1. Genders wise Frequency & Percentage
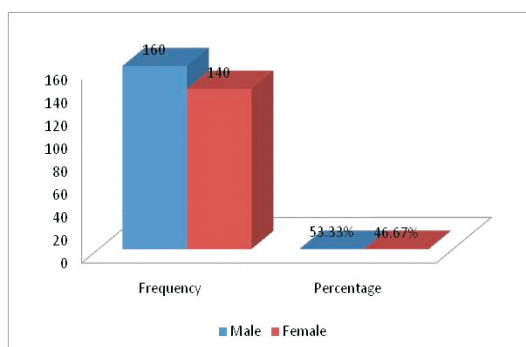
Graph : 1

2. Age wise Frequency & Percentage
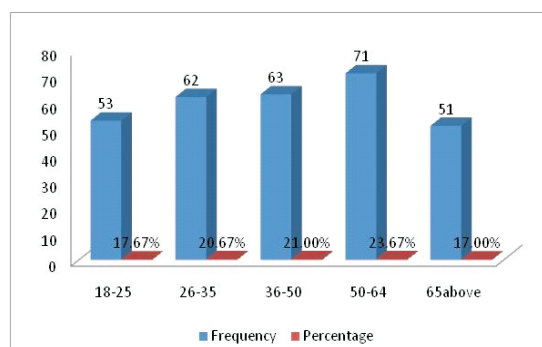
Graph: 2

3. **Income levels wise Frequency & Percentage Percentage**
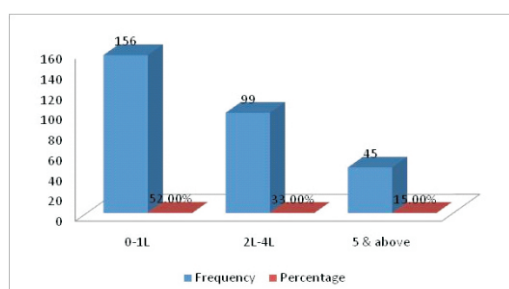
Graph: 3

4. **Profession wise Frequency &**
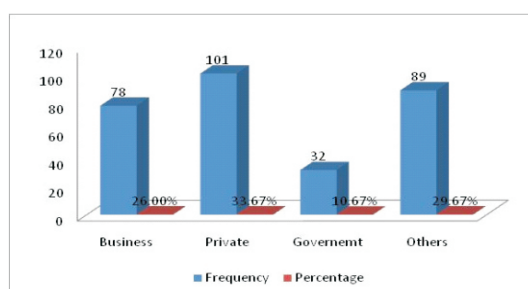
Graph: 4

4. **Education wise Frequency & Percentage**
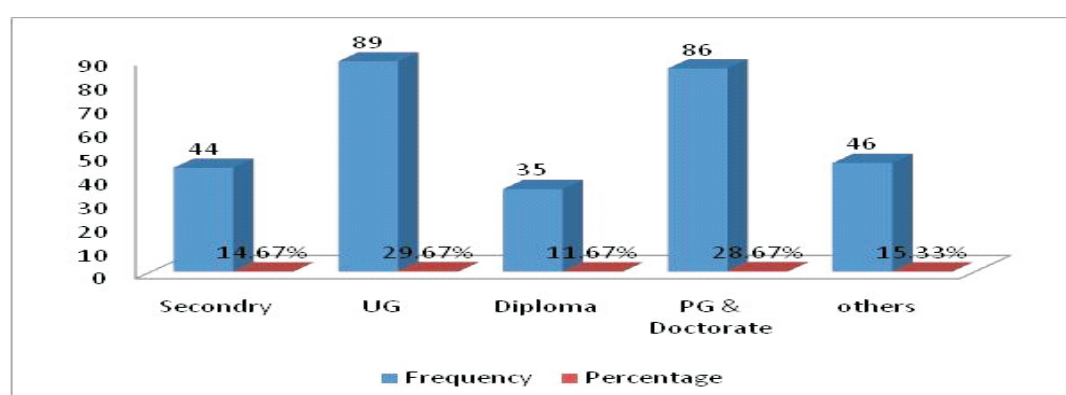
Graph: 5

Graph Of Model - I

Model one shows the regression analysis based on dichotomous (0, 1) system i.e. all the feedbacks scored 4 & 5 are converted in to score "1" and rest scores 1,2,3 are converted in to score "0".
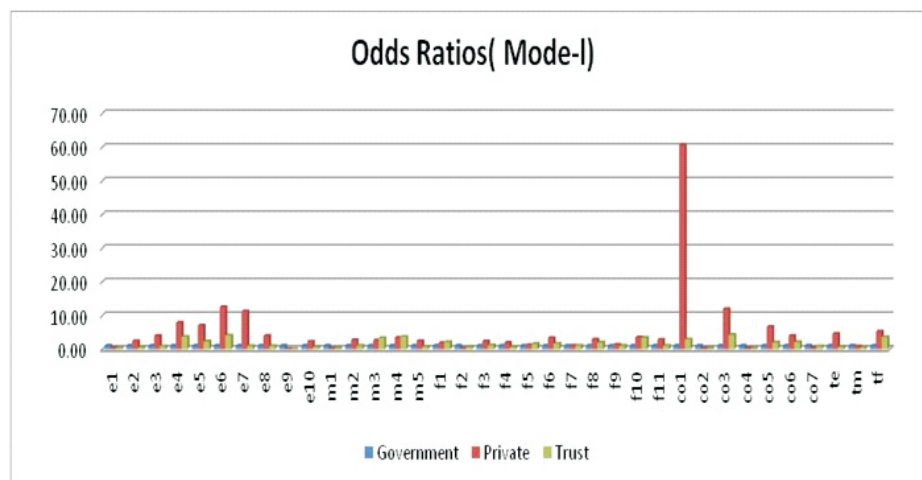
Graph:6

Graph Of Model-II

Model second shows the regression analysis based on continuous variable (1, 2, 3, 4, 5) system i.e. as described in likert 5 pointer scale. Highly dissatisfied to highly satisfied.
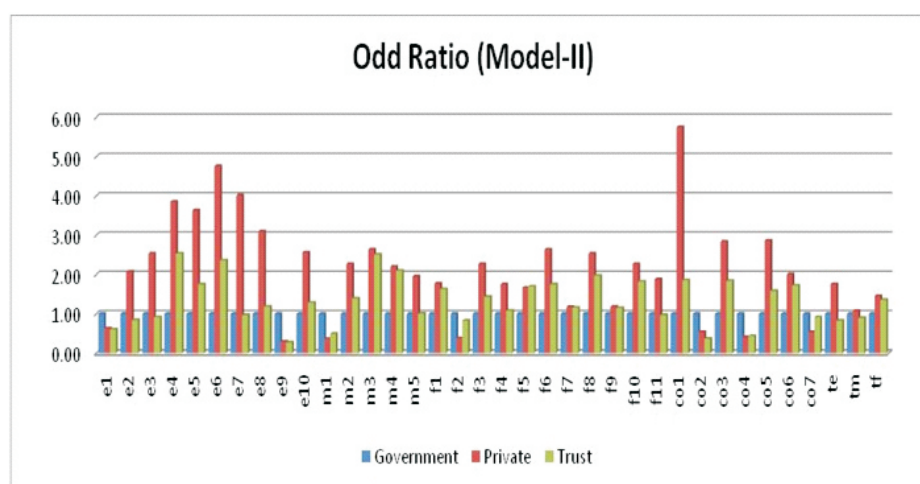
Graph:7

Interpretation of Model -I & Model-II

In case of Consent after Counseling (e1) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 0.39 times differ from government hospitals whereas 0.36 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.63 times differ from government hospitals whereas 0.60 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one) .

In case of Proper history (e2) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 2.45 times better than government hospitals whereas 0.53 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.07 better than from government hospitals whereas 0.84 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I found statistically significant for the both private & trust hospital but model II is significant only for private hospitals. (Where government hospitals were used as reference value one)

In case of Asking about any Allergy (e3) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 3.94 times better than government hospitals whereas 0.87 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.53 times better than government hospitals whereas 0.91 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Initial assessment on time (e4) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 7.89 times better than government hospitals whereas 3.69 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 3.85 times better than government hospitals whereas 2.53 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one).

In case of Vital sign recorded (e5) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 7.02 times better than government hospitals whereas 2.29 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 3.63 times better than government hospitals whereas 1.75 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one).

In case of Giving proper progress day by day (e6) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 12.47 times better than government hospitals whereas 4.09 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 4.75 times better than government hospitals whereas 2.36 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one).

In case of Infection control (e7): Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 11.22 times better than government hospitals whereas 0.94 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 4.01 times better than government hospitals whereas 0.97 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Behavior (e8): Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 3.97 times better than government hospitals whereas 0.95 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.3.09 times better than government hospitals whereas 1.18 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Knowledge (e9) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 0.10 times differ from government hospitals whereas 0.08 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.29 times differ from government hospitals whereas 0.27 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Patient rights (e10) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 2.25 times better than government hospitals whereas 0.75 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.55 times better than government hospitals whereas 1.28 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Estimated cost/Billing (m1) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction   by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 0.18 times differ from government hospitals whereas 0.25 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.36 times differ from government hospitals whereas 0.49 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Have u be the part of Decision making/Care plan (m2) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 2.66 times better than government hospitals whereas no difference observed in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.27 times better than government hospitals whereas 1.39 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Registration /Discharge process is proper (m3) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 2.61 times better than government hospitals whereas 3.33 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.63 times better than government hospitals whereas 2.50 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Waiting time is appropriate in OPD/diagnostics and Pharmacy (m4) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 3.40 times better than government hospitals whereas 3.70 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.20 times better than government hospitals whereas 2.09 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Cleanliness in hospital (m5) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 2.45 times better than differ from government hospitals whereas 0.76 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.95 times better than from government hospitals whereas no difference were observed in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant on trust hospitals (where government hospitals were used as reference value one).

In case of Drinking Water quality and affordability (f1) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 0.1.84 times better than government hospitals whereas 2.08 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.76 times better than government hospitals whereas 1.63 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Parking (f2) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 0.18 times differ from government hospitals whereas 0.63 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.37 times differ from government hospitals whereas 0.82 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Canteen/Food (f3) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 2.36 times better than government hospitals whereas no difference were observed in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.27 times better than government hospitals whereas 1.43 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals & model II for trust hospital as well but model I was insignificant on trust hospitals (where government hospitals were used as reference value one).

In case of Air conditioning (f4) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 1.90 times better than government hospitals whereas 0.62 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.75 times better than government hospitals whereas no difference was observed in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models were insignificant on trust hospitals (where government hospitals were used as reference value one).

In case of Waiting arrangement (f5) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 1.27 times differ from government hospitals whereas 1.62 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.66 times better than government hospitals whereas 1.70 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-II found statistically significant for the aspect of private & trust hospitals but model I was insignificant in case of both private & trust hospitals (where government hospitals were used as reference value one).

In case of Bed arrangement (f6) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 3.32 times better than government hospitals whereas 1.66 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.63 times better than government hospitals whereas 1.75 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals & model II for trust hospital as well but model I is insignificant on trust hospitals (where government hospitals were used as reference value one).

In case of Ambulance facility (f7) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 1.08 times differ from government hospitals whereas 1.08 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.17 times differ from government hospitals whereas 1.16 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically insignificant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Diagnostic quality and affordability (f8) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 2.9 times better than government hospitals whereas 2.0 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.53 times better than from government hospitals whereas 1.97 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Signage's accessibility and affordability (f9) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 1.37 times differ from government hospitals whereas 1.04 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.18 times differ from government hospitals whereas 1.15 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically insignificant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Bio Medical waste mgmt (f10) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 3.52 times better than government hospitals whereas 3.38 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.27 times better than government hospitals whereas 1.82 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Lift Plan/Fire Plan (f11) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 2.81 times better than government hospitals whereas 1.04 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.87 times better than government hospitals whereas 0.97 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals but both models are insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Composite variable (co1) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 6.52 times better than government hospitals whereas 2.91 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 5.75 times better than government hospitals whereas 1.85 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Composite variable (co2) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Employee attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The results of model I suggest that the private hospitals were 0.30 times differ from government hospitals whereas 0.22 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.53 times differ from government hospitals whereas 0.36 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Composite variable (co3) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 11.91 times better than government hospitals whereas 4.24 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.83 times better than government hospitals whereas 1.83 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Composite variable (co4) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 0.22 times differ from government hospitals whereas 0.20 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.40 times differ from government hospitals whereas 0.43 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Composite variable (co5) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 6.64 times better than government hospitals whereas 1.98 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.86 times better than government hospitals whereas 1.58 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Composite variable (co6) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 3.94 times better than government hospitals whereas 2.11 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 2.00 times better than government hospitals whereas 1.72 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

In case of Composite variable (co7) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 0.42 times differ from government hospitals whereas 0.88 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 0.53 times differ from government hospitals whereas 0.91 times differ from government hospitals in case of hospital run by trusts. . So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals but both models were insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Total Employees (te) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 4.55 times better than government hospitals whereas 0.70 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.75 times better than government hospitals whereas 0.82 times differ from government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private hospitals & model II for trust hospital as well but model I is insignificant for trust hospitals (where government hospitals were used as reference value one).

In case of Total Management (tm) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Quality provided through Management attribute. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 0.85 times differ from government hospitals whereas 0.50 times differ from government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.07 times differ from government hospitals whereas 0.89 times differ from government hospitals in case of hospital run by trusts. . So far the statistical significance is concern model-I & model-II both models found statistically insignificant for the aspect of private hospitals & model II for trust hospital as well but model I is significant for trust hospitals (where government hospitals were used as reference value one).

In case of Total Facility (tf) : Regression technique was employed to assess the impact of continuous quality improvement on patient satisfaction by Continuous quality through facility provided. Two models namely Model-I which is based on dichotomous(0 or 1) system and model –II, based on continuous system(1,2,3,4,5) have been used, The result of model I suggest that the private hospitals were 5.24 times better than government hospitals whereas 3.58 times better than government hospitals in case of hospital run by trusts.

In Model- II continuous variables were used. The Parameter suggests that private hospitals were 1.45 times better than government hospitals whereas 1.35 times better than government hospitals in case of hospital run by trusts. So far the statistical significance is concern model-I & model-II both models found statistically significant for the aspect of private & trust hospitals (where government hospitals were used as reference value one)

D Space™

WARDS CATEGORY PREFERRENCE:

Feedbacks came through different profiles and this graph plots for preference of respondents about hospital quality among different ward category of all type of hospitals (Government, Private & Trust). In this analysis 37% respondents prefer general ward category while they are from any profile. 34% respondents like private ward category & rest 29 % respondents like Semi private category.

Figure: Frequency & Percentage — Private 101, 34%; semi Priv 88, 29%; General 111, 37%
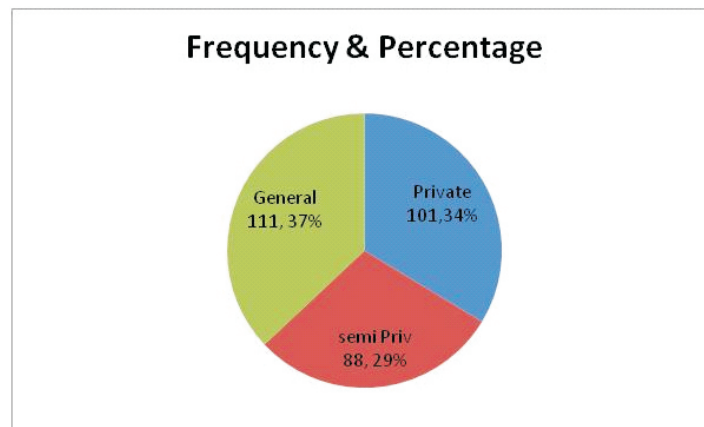
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