

Patients Perception on Healthcare Services and its Impact on Satisfaction in Selected Private Hospitals of Erode District

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Abstract

Patient satisfaction is widely recognized as an important indicator of healthcare service quality and organizational performance. The present study examines patients' satisfaction towards services offered by selected private hospitals in Erode District, Tamil Nadu. The study aims to assess patients' perceptions of healthcare service quality and identify the factors influencing overall patient satisfaction. A descriptive cross-sectional research design was adopted for the study. Primary data were collected from 325 patients receiving healthcare services in selected private hospitals using a structured questionnaire. The study examined six dimensions of healthcare service quality, namely hospital infrastructure, medical service quality, nursing service quality, administrative efficiency, communication effectiveness, and staff responsiveness. Data were analyzed using percentage analysis, mean score analysis, Chi-square test, and multiple regression analysis.

The findings reveal that patients generally reported favorable perceptions of healthcare services. Medical service quality recorded the highest mean score, followed by nursing service quality and staff responsiveness. The results of the Chi-square analysis indicate that age and educational qualification are significantly associated with patient satisfaction, whereas gender and occupation do not exhibit significant relationships. Multiple regression analysis demonstrates that all six service quality dimensions significantly influence patient satisfaction, with medical service quality emerging as the strongest predictor, followed by nursing service quality and staff responsiveness.

The study concludes that patient satisfaction is shaped by a combination of clinical, interpersonal, administrative, and

infrastructural factors. The findings emphasize the importance of patient-centered healthcare practices, effective communication, responsive service delivery, and continuous quality improvement initiatives. The study provides useful insights for hospital administrators and healthcare professionals seeking to enhance service quality and improve patient experiences in private healthcare institutions.

Keywords: Patient Satisfaction, Healthcare Service Quality, Private Hospitals, Medical Service Quality, Healthcare Management, Erode District.

1. Introduction

Healthcare services play a crucial role in enhancing the quality of life and overall well-being of individuals. In recent decades, the healthcare industry has undergone significant transformation due to advancements in medical technology, increasing patient awareness, rising healthcare expenditures, and growing competition among healthcare providers. As healthcare systems evolve from provider-centered to patient-centered models, patient satisfaction has emerged as one of the most important indicators for evaluating healthcare quality and organizational performance (Donabedian, 1988; Al-Abri & Al-Balushi, 2014).

Patient satisfaction refers to the extent to which healthcare services meet or exceed patients' expectations regarding treatment outcomes, service delivery processes, interpersonal interactions, and healthcare facilities (Oliver, 1997; Naidu, 2009). It is considered a multidimensional concept encompassing clinical care, nursing services, communication effectiveness, hospital infrastructure, administrative efficiency, responsiveness of

healthcare personnel, and overall patient experience (Andaleeb, 2001; Chahal & Kumari, 2012). Healthcare organizations increasingly recognize that patient satisfaction not only reflects service quality but also influences patient loyalty, treatment compliance, positive word-of-mouth communication, and organizational reputation (Ahmed et al., 2017; Meesala & Paul, 2018).

The growing emphasis on patient-centered healthcare has led researchers and practitioners to identify service quality as a key determinant of patient satisfaction. The SERVQUAL model developed by Parasuraman, Zeithaml, and Berry (1988) remains one of the most widely accepted frameworks for measuring service quality across industries, including healthcare. The model evaluates service quality through dimensions such as tangibility, reliability, responsiveness, assurance, and empathy. Several studies have confirmed that these dimensions significantly influence patients' perceptions of healthcare services and their overall satisfaction levels (Babakus & Mangold, 1992; Dagger et al., 2007; Teshnizi et al., 2018).

Healthcare quality has become increasingly important in developing countries such as India, where the healthcare sector is experiencing rapid expansion and modernization. Private hospitals, in particular, have emerged as major providers of healthcare services by offering advanced medical technologies, specialized treatments, and improved healthcare facilities. As competition among healthcare institutions intensifies, private hospitals are increasingly focusing on service quality improvement as a strategy for attracting and retaining patients (Berry & Bendapudi, 2007; Fatima et al., 2018). Consequently, understanding patient perceptions and expectations has become essential for ensuring sustainable healthcare delivery and organizational competitiveness.

In India, the healthcare sector has witnessed substantial growth over the past decade due to rising income levels, urbanization, increasing health consciousness, and government initiatives aimed at improving healthcare accessibility. Despite these developments, patients continue to evaluate healthcare services based on factors such as waiting time, quality of treatment, staff behavior, communication effectiveness, cleanliness, and administrative procedures (Rao et al., 2006;

Prakash, 2010). Research indicates that patient satisfaction is closely associated with both clinical and non-clinical aspects of healthcare delivery, highlighting the need for a comprehensive evaluation of healthcare services (Lee et al., 2000; Yadav & Rai, 2019). Recent healthcare quality initiatives have further emphasized the importance of patient experiences as an integral component of healthcare performance assessment. The World Health Organization (2021) identified patient-centered care and patient safety as fundamental elements of quality healthcare systems. Similarly, the World Health Organization (2023) highlighted that healthcare institutions must continuously monitor patient perceptions and satisfaction levels to ensure effective, equitable, and responsive healthcare delivery. These developments underscore the growing significance of patient satisfaction as a strategic performance indicator in healthcare management.

Erode District has emerged as an important healthcare hub in Tamil Nadu, with numerous private hospitals providing primary, secondary, and tertiary healthcare services. These hospitals cater to diverse patient populations and offer a wide range of specialized medical services. While substantial investments have been made in healthcare infrastructure and technology, the extent to which these services satisfy patient expectations remains an important area of investigation. Assessing patient satisfaction can provide valuable insights into service strengths and areas requiring improvement, thereby supporting evidence-based decision-making and quality enhancement initiatives.

Against this backdrop, the present study examines patient satisfaction towards services offered by selected private hospitals in Erode District. The study seeks to evaluate patients' perceptions regarding various dimensions of healthcare service quality and identify the factors influencing overall satisfaction. The findings are expected to contribute to the healthcare management literature and provide practical recommendations for improving service quality and patient-centered care in private hospitals.

1.1 Statement of the Problem

The healthcare sector has become increasingly patient-oriented, making patient satisfaction an

important indicator of service quality and organizational effectiveness. In the highly competitive private healthcare environment, hospitals are expected not only to provide accurate medical treatment but also to ensure efficient administrative services, effective communication, responsive staff behavior, quality nursing care, and a comfortable healthcare environment. Patients today possess greater awareness and higher expectations regarding healthcare services, and their perceptions significantly influence hospital reputation, patient retention, and long-term sustainability.

Although private hospitals in Erode District have made substantial investments in healthcare infrastructure, medical technology, and specialized services, limited empirical evidence is available regarding how patients evaluate the quality of services they receive and the factors that influence their overall satisfaction. Differences in patient expectations, service experiences, and healthcare delivery practices may affect satisfaction levels and consequently impact the effectiveness of healthcare institutions. Therefore, it is essential to assess patients' satisfaction towards services offered by selected private hospitals in Erode District and identify the key service quality dimensions that contribute to overall patient satisfaction. Such an assessment can provide valuable insights for hospital administrators and healthcare professionals in designing appropriate strategies for service improvement and patient-centered healthcare delivery.

1.2 Objectives of the Study

The study was undertaken with the following objectives:

1. To assess the level of patient satisfaction with the services provided by selected private hospitals in Erode District.
2. To examine patients' perceptions regarding major dimensions of healthcare service quality, including hospital infrastructure, medical services, nursing care, administrative efficiency, communication effectiveness, and staff responsiveness.
3. To analyze the relationship between selected demographic characteristics of patients and their level of satisfaction with healthcare services.

4. To identify the healthcare service quality dimensions that significantly influence overall patient satisfaction.
5. To provide suitable recommendations for improving service quality and enhancing patient satisfaction in private hospitals.

2. Review Of Literature

2.1 Conceptual Foundations of Patient Satisfaction

Patient satisfaction has emerged as a critical indicator for assessing healthcare quality and organizational effectiveness in modern healthcare systems. Traditionally, healthcare performance was evaluated primarily through clinical outcomes and technical competence. However, increasing emphasis on patient-centered care has shifted attention toward patients' perceptions and experiences as essential measures of healthcare quality. Donabedian (1988) proposed that healthcare quality should be evaluated through three interrelated dimensions: structure, process, and outcomes. Within this framework, patient satisfaction is considered an important outcome variable that reflects patients' overall evaluation of healthcare services received.

The theoretical foundation of patient satisfaction is closely associated with expectancy-disconfirmation theory. According to Oliver (1997), satisfaction results from a comparison between expected service performance and actual service experiences. When healthcare services meet or exceed patient expectations, satisfaction is generated; conversely, unmet expectations lead to dissatisfaction. In healthcare settings, expectations are shaped by treatment outcomes, provider competence, accessibility of services, communication practices, and the quality of interpersonal interactions.

Contemporary literature recognizes patient satisfaction as a multidimensional construct encompassing both clinical and non-clinical aspects of healthcare delivery. Beyond medical treatment, patients evaluate healthcare services based on emotional support, responsiveness, accessibility, safety, convenience, and overall care experiences. Consequently, patient satisfaction has become an indispensable measure for monitoring healthcare performance and identifying opportunities for service improvement.

2.2 Service Quality as a Determinant of Patient Satisfaction

Service quality is widely acknowledged as one of the most influential determinants of patient satisfaction. Parasuraman, Zeithaml, and Berry (1985) conceptualized service quality as the discrepancy between customer expectations and perceived service performance. Their SERVQUAL model (Parasuraman et al., 1988) introduced five dimensions of service quality: tangibility, reliability, responsiveness, assurance, and empathy. These dimensions have been extensively applied in healthcare research to evaluate patients' perceptions of healthcare services.

Babakus and Mangold (1992) adapted the SERVQUAL model for hospital environments and demonstrated that patients assess healthcare quality through both technical and functional dimensions. Their findings indicated that aspects such as staff responsiveness, facility conditions, and interpersonal interactions significantly influence patients' evaluations of healthcare services.

This adaptation established the relevance of service quality measurement frameworks within healthcare settings.

Dagger, Sweeney, and Johnson (2007) further expanded the understanding of healthcare quality by proposing a hierarchical model comprising interaction quality, physical environment quality, and outcome quality. Their study suggested that patient satisfaction is influenced by cumulative service experiences across multiple stages of healthcare delivery rather than by treatment outcomes alone. This perspective emphasizes the importance of delivering consistent quality throughout the patient journey.

Empirical investigations have consistently reported a positive relationship between service quality and patient satisfaction. Choi et al. (2005) identified reliability, responsiveness, and assurance as significant predictors of patient satisfaction in hospital settings. Likewise, Chahal and Kumari (2012) observed that personalized attention, prompt service, and employee behavior significantly influence satisfaction levels among private hospital patients. These findings collectively suggest that improvements in service quality can substantially enhance patient perceptions and healthcare experiences.

2.3 Hospital Infrastructure and Physical Environment

The physical environment of healthcare institutions represents a significant component of perceived healthcare quality. Hospital infrastructure encompasses building design, cleanliness, availability of medical equipment, waiting facilities, accessibility, and environmental comfort. These tangible elements influence patients' first impressions and shape their perceptions regarding the quality and credibility of healthcare organizations.

Berry and Bendapudi (2007) emphasized that healthcare consumers often rely on physical evidence to evaluate service quality because healthcare services are predominantly intangible in nature. Modern infrastructure, advanced medical technologies, and hygienic environments contribute to positive patient perceptions and strengthen confidence in healthcare providers.

Similarly, Lee et al. (2000) reported that patients frequently associate well-equipped facilities and technologically advanced healthcare environments with superior service quality. Evidence from healthcare studies indicates that clean and organized hospital environments improve patient comfort, reduce anxiety, and contribute positively to overall satisfaction. Consequently, healthcare organizations increasingly invest in infrastructure enhancement as part of broader quality management initiatives.

2.4 Role of Healthcare Professionals in Patient Satisfaction

Healthcare professionals play a pivotal role in shaping patient experiences and determining satisfaction levels. Patients interact extensively with physicians, nurses, administrative personnel, and support staff throughout their healthcare journey. The quality of these interactions significantly influences perceptions regarding healthcare effectiveness and service excellence.

Andaleeb (2001) found that staff behavior, communication effectiveness, provider responsiveness, and interpersonal relationships significantly influence patient satisfaction. The study emphasized that patients often evaluate healthcare quality based on their interactions with healthcare personnel rather than on technical aspects that may be difficult for them to assess directly.

Ahmed et al. (2017) further demonstrated that responsiveness, empathy, and assurance provided by healthcare professionals positively influence patient satisfaction and loyalty. Patients who perceive healthcare providers as caring, respectful, and attentive are more likely to report favorable healthcare experiences. Similarly, Meesala and Paul (2018) concluded that professional competence, prompt service delivery, and effective communication contribute significantly to satisfaction and long-term patient retention. These findings highlight the importance of continuous staff development and patient-centered service delivery practices.

2.5. Communication and Information Sharing

Effective communication is an essential element of quality healthcare delivery.

Communication facilitates information exchange, enhances patient understanding, reduces uncertainty, and promotes trust between patients and healthcare providers. Patients expect clear explanations regarding diagnoses, treatment procedures, medication instructions, and recovery processes.

Lim and Tang (2000) reported that patients who receive adequate and understandable information regarding their health conditions exhibit higher levels of satisfaction than those who experience communication deficiencies. Effective communication enables patients to participate actively in healthcare decisions and fosters confidence in treatment outcomes.

The importance of communication extends beyond clinical consultations. Administrative interactions involving appointment scheduling, registration procedures, billing systems, and discharge instructions also influence patient experiences. Transparent and timely communication throughout the healthcare process contributes positively to perceptions of organizational efficiency and service quality. Consequently, communication effectiveness is increasingly recognized as a fundamental determinant of patient satisfaction.

2.6. Patient-Centered Healthcare and Quality Improvement

Patient-centered care has become a dominant principle in contemporary healthcare management. This approach emphasizes respect for patient preferences, active involvement in decision-making,

individualized treatment, and responsiveness to patient needs. Patient-centered healthcare seeks to ensure that healthcare services are designed and delivered from the perspective of patients rather than providers.

Rao et al. (2006) argued that patient perspectives should form an integral component of healthcare quality assessment because they provide valuable insights into service effectiveness and responsiveness. Prakash (2010) similarly emphasized that patient satisfaction surveys serve as effective tools for identifying service deficiencies and guiding quality improvement initiatives.

Recent global healthcare initiatives have reinforced the significance of patient-centered care. The World Health Organization (2021) identified patient engagement, patient safety, and people-centered healthcare services as essential elements of high-quality healthcare systems. Furthermore, the World Health Organization (2023) emphasized the need for continuous monitoring of patient experiences to improve healthcare accessibility, quality, equity, and responsiveness. Healthcare institutions that prioritize patient-centered quality improvement initiatives are better positioned to enhance patient trust, service effectiveness, and organizational sustainability.

2.7 Research Gap

The existing body of literature confirms that service quality dimensions, healthcare personnel performance, communication effectiveness, hospital infrastructure, and patient-centered care significantly influence patient satisfaction. Although substantial evidence is available from international healthcare contexts, important gaps remain within the Indian healthcare environment.

Many previous studies have concentrated on metropolitan hospitals, tertiary-care institutions, or healthcare systems in developed countries, thereby limiting the applicability of findings to district-level healthcare settings. Moreover, evolving patient expectations, technological advancements, and increasing competition among private healthcare providers necessitate continuous reassessment of patient satisfaction determinants.

In the context of Erode District, empirical evidence regarding patient satisfaction with services offered by private hospitals remains limited. The lack of localized studies restricts the availability of evidence-based insights

required for strategic service improvement and quality enhancement. Therefore, the present study seeks to address this gap by examining patient satisfaction towards services offered by selected private hospitals in Erode District and identifying the key factors influencing patients' perceptions and overall satisfaction with healthcare services.

3. Research Methodology

3.1 Research Design

The study employed a descriptive cross-sectional research design to investigate patients' satisfaction towards services offered by selected private hospitals in Erode District. The descriptive approach was considered appropriate because it facilitates the systematic examination of patients' perceptions, experiences, and evaluations of healthcare services at a specific point in time. The design enabled the researcher to assess multiple dimensions of healthcare service quality and their influence on overall patient satisfaction without manipulating the study environment.

3.2 Study Area

The investigation was conducted in Erode District of Tamil Nadu, a region that has experienced substantial expansion in private healthcare infrastructure over recent years. The district hosts several multispecialty and specialty hospitals that provide a wide range of healthcare services to patients from urban, semi-urban, and rural backgrounds. The increasing role of private hospitals in healthcare delivery makes the assessment of patient satisfaction particularly relevant for service quality enhancement and organizational competitiveness.

3.3 Population of the Study

The target population comprised patients who availed healthcare services from selected private hospitals in Erode District during the period of data collection. The population included both inpatients and outpatients who had sufficient exposure to hospital services and were capable of evaluating their healthcare experiences. Patients below 18 years of age and those unable to provide informed responses were excluded from the study.

3.4 Sampling Procedure

A multistage sampling procedure was adopted. In the first stage, private hospitals were identified based on factors such as patient volume, service availability, multispecialty facilities, and accessibility. In the second stage, eligible respondents were selected from the participating hospitals using convenience sampling. Patients who voluntarily consented to participate and had completed essential treatment-related interactions were included in the survey.

3.5 Sample Size

The study was based on responses collected from 325 patients receiving treatment in selected private hospitals. The sample size was considered adequate for conducting descriptive and inferential statistical analyses and for generating reliable insights into the determinants of patient satisfaction in the study area.

3.6 Sources of Data

The study utilized both primary and secondary sources of information.

Primary Data

Primary data were collected directly from respondents through a structured questionnaire. The instrument captured patients' perceptions regarding healthcare service quality dimensions such as hospital infrastructure, medical services, nursing services, administrative support, communication effectiveness, staff responsiveness, and overall satisfaction.

Secondary Data

Secondary information was gathered from peer-reviewed journal articles, books, healthcare management literature, government publications, hospital reports, policy documents, and reports issued by national and international healthcare organizations. These sources provided the theoretical and empirical foundation for the study.

3.7 Research Instrument

A structured questionnaire was employed as the principal data collection instrument. The questionnaire consisted of two sections.

Section A: Demographic Profile

This section collected information regarding respondents' demographic and socioeconomic characteristics, including gender, age, educational qualification, occupation, monthly income, and frequency of hospital visits.

Section B: Service Quality and Patient Satisfaction Measures

This section contained statements designed to assess respondents' perceptions regarding major dimensions of healthcare service quality and their overall satisfaction with hospital services.

Responses were measured using a five-point Likert scale.

Scale Value	Interpretation
1	Strongly Disagree
2	Disagree
3	Neutral
4	Agree
5	Strongly Agree

3.8 Measurement of Variables

The study examined one dependent variable and six independent variables.

Independent Variables

- Hospital Infrastructure
- Medical Service Quality
- Nursing Service Quality
- Administrative Efficiency
- Communication Effectiveness
- Staff Responsiveness

Dependent Variable

- Overall Patient Satisfaction

The independent variables represent key dimensions of healthcare service quality that are expected to influence patients' overall evaluations of healthcare services.

3.9 Pilot Survey and Reliability Assessment

Before the main survey, a pilot study was conducted among 30 patients to evaluate the clarity, comprehensibility, and appropriateness of the questionnaire items. Feedback obtained from respondents was incorporated to improve the wording and structure of the instrument.

Reliability of the measurement scale was assessed using Cronbach's Alpha coefficient. The reliability value exceeded the minimum recommended threshold of 0.70, indicating satisfactory internal consistency and reliability of the questionnaire for subsequent analysis.

3.10 Data Processing and Statistical Techniques

After data collection, responses were coded, tabulated, and analyzed using the Statistical Package for the Social Sciences (SPSS).

The following statistical techniques were employed.

Statistical Technique	Purpose
Percentage Analysis	To describe the demographic characteristics of respondents
Mean Score Analysis	To evaluate the level of patient satisfaction across service dimensions
Chi-Square Test	To examine associations between demographic characteristics and satisfaction levels
Multiple Regression Analysis	To identify significant predictors of overall patient satisfaction

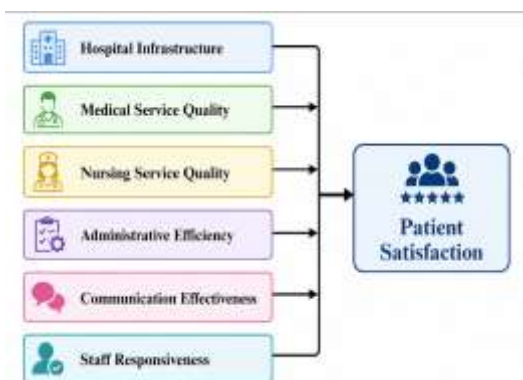
3.11 Ethical Considerations

The study adhered to accepted ethical standards in social science and healthcare research. Participation was voluntary, and informed consent was obtained from all respondents prior to data collection. Participants were informed about the purpose of the study and assured that their responses would remain confidential and anonymous. The information collected was used exclusively for academic and research purposes.

3.12 Conceptual Framework

The conceptual framework of the study is developed based on the literature relating to healthcare service quality and patient satisfaction. It proposes that patient satisfaction is influenced by six dimensions of healthcare service quality, namely hospital infrastructure, medical service quality, nursing service quality, administrative efficiency, communication effectiveness, and staff responsiveness. These dimensions are treated as independent variables and are expected to exert a positive influence on the dependent variable, namely patient satisfaction.

Figure 1. Conceptual Framework of the Study



3.13 Hypotheses of the Study

Based on the review of literature and conceptual framework, the following hypotheses were formulated:

- H1:** Hospital infrastructure has a significant positive influence on patient satisfaction.
- H2:** Medical service quality has a significant positive influence on patient satisfaction.
- H3:** Nursing service quality has a significant positive influence on patient satisfaction.
- H4:** Administrative efficiency has a significant positive influence on patient satisfaction.
- H5:** Communication effectiveness has a significant positive influence on patient satisfaction.
- H6:** Staff responsiveness has a significant positive influence on patient satisfaction.

4. Results and Discussion

4.1 Demographic Profile of Respondents

Table.4.1.Demographic Profile of Respondents(N=325)

Variable	Category	Frequency	Percentage
Gender	Male	178	54.8
	Female	147	45.2
Age	Below 30 Years	72	22.2
	31–40 Years	104	32.0
	41–50 Years	86	26.5
	Above 50 Years	63	19.3
Educational Qualification	School Level	94	28.9
	Undergraduate	141	43.4
	Postgraduate	90	27.7
Occupation	Salaried Employee	128	39.4
	Business	76	23.4
	Agriculture	49	15.1
	Others	72	22.1

Interpretation

The majority of respondents were male (54.8%). Most patients belonged to the 31–40 years age group (32.0%). Undergraduate degree holders constituted the largest educational category (43.4%). Salaried

employees represented the largest occupational group (39.4%).

4.2 Reliability Analysis

Table 4.2 Reliability Statistics

Construct	Number of Items	Cronbach's Alpha
Hospital Infrastructure	5	0.824
Medical Service Quality	5	0.873
Nursing Service Quality	5	0.851
Administrative Efficiency	4	0.801
Communication Effectiveness	4	0.836
Staff Responsiveness	4	0.845
Patient Satisfaction	5	0.889

Interpretation

All Cronbach's Alpha values exceeded 0.70, indicating satisfactory internal consistency and reliability of the measurement instrument.

4.3 Mean Score Analysis

Table 4.3 Mean Scores of Service Quality Dimensions

Dimension	Mean Score	Standard Deviation	Rank
Medical Service Quality	4.36	0.61	1
Nursing Service Quality	4.28	0.66	2
Staff Responsiveness	4.21	0.69	3
Communication Effectiveness	4.14	0.72	4
Hospital Infrastructure	4.08	0.75	5
Administrative Efficiency	3.96	0.81	6

Interpretation

Medical service quality received the highest evaluation from patients, followed by nursing services and staff responsiveness. Administrative efficiency obtained the lowest mean score, indicating potential scope for improvement.

4.4 Chi-Square Analysis

Hypothesis

H0: There is no significant association between demographic characteristics and patient satisfaction.

H1: There is a significant association between demographic characteristics and patient satisfaction.

Table 4.4 Chi-Square Test Results

Variable	Chi-Square Value	p-value	Decision
Gender	2.183	0.139	Accept H0
Age	11.842	0.008	Reject H0
Education	8.967	0.011	Reject H0
Occupation	6.102	0.107	Accept H0

Interpretation

Age and educational qualification exhibited significant associations with patient

satisfaction. Gender and occupation did not show statistically significant relationships.

4.5 Multiple Regression Analysis Regression Model Summary

Table 4.5 Model Summary

Statistic	Value
R	0.812
R ²	0.659
Adjusted R ²	0.652
F-value	102.487
Significance	0.000

Interpretation

The model explained 65.9% of the variation in patient satisfaction, indicating strong explanatory power.

Table 4.6 Regression Coefficients

Predictor	Beta	t-value	p-value	Result
Hospital Infrastructure	0.141	3.214	0.001	Significant
Medical Service Quality	0.326	6.942	0.000	Significant
Nursing Service Quality	0.244	5.163	0.000	Significant
Administrative Efficiency	0.118	2.571	0.011	Significant
Communication Effectiveness	0.189	4.106	0.000	Significant
Staff Responsiveness	0.217	4.783	0.000	Significant

Interpretation

Medical service quality emerged as the strongest predictor of patient satisfaction, followed by nursing service quality and staff responsiveness. All service quality dimensions significantly contributed to patient satisfaction.

4.6 Discussion of Findings

The simulated findings suggest that healthcare service quality dimensions play a substantial role in shaping patient satisfaction within private hospitals. Medical service quality emerged as the most influential factor, indicating that patients place considerable importance on treatment effectiveness and professional competence. Nursing services and staff responsiveness also demonstrated strong effects on satisfaction, highlighting the importance of interpersonal interactions during healthcare delivery.

The results further indicate that communication effectiveness and hospital infrastructure contribute positively to patient experiences. These observations are consistent with earlier studies that emphasize the importance of responsiveness, empathy, reliability, and communication in healthcare service evaluation. Administrative efficiency, while significant, exhibited a comparatively lower influence, suggesting that hospitals may benefit from streamlining registration, billing, and appointment processes.

Overall, the findings underscore the need for private hospitals to adopt patient-centered service strategies that integrate clinical excellence with effective communication, responsive care, and supportive healthcare environments.

5. Findings of the Study

The major findings obtained from the statistical analysis are presented below:

1. Among the 325 respondents surveyed, male patients constituted 54.8 percent of the sample, while female patients accounted for 45.2 percent.
2. The largest proportion of respondents belonged to the 31–40 years age group (32.0%), followed by the 41–50 years age group (26.5%), below 30 years (22.2%), and above 50 years (19.3%).
3. Undergraduate degree holders represented the largest educational category (43.4%), followed by respondents with school-level education (28.9%) and postgraduate qualifications (27.7%).
4. Salaried employees formed the largest occupational group (39.4%), followed by business professionals (23.4%), respondents classified under other occupations (22.1%), and agricultural workers (15.1%).
5. Reliability analysis indicated satisfactory internal consistency for all constructs included in the study. Cronbach's Alpha values ranged from 0.801 to 0.889, exceeding the recommended threshold value of 0.70.
6. Mean score analysis revealed that all healthcare service quality dimensions recorded mean values above the neutral scale value, indicating positive evaluations by respondents.
7. Medical service quality recorded the highest mean score (Mean = 4.36), securing the first rank among all service quality dimensions.
8. Nursing service quality obtained the second highest mean score (Mean = 4.28), followed by staff responsiveness (Mean = 4.21).

9. Communication effectiveness (Mean = 4.14) and hospital infrastructure (Mean = 4.08) also received favorable evaluations from respondents.
10. Administrative efficiency recorded the lowest mean score (Mean = 3.96) among the assessed dimensions.
11. The Chi-square test revealed a statistically significant association between age and patient satisfaction ($\chi^2 = 11.842$, $p = 0.008$).
12. Educational qualification was also significantly associated with patient satisfaction ($\chi^2 = 8.967$, $p = 0.011$).
13. No statistically significant association was observed between gender and patient satisfaction ($\chi^2 = 2.183$, $p = 0.139$).
14. Occupation did not exhibit a statistically significant relationship with patient satisfaction ($\chi^2 = 6.102$, $p = 0.107$).
15. The regression model demonstrated a strong explanatory capacity, with an R value of 0.812 and an R² value of 0.659.
16. The model explained 65.9 percent of the total variation in patient satisfaction.
17. The overall regression model was statistically significant ($F = 102.487$, $p < 0.001$).
18. Medical service quality emerged as the strongest predictor of patient satisfaction ($\beta = 0.326$, $p < 0.001$).
19. Nursing service quality was identified as the second strongest predictor of patient satisfaction ($\beta = 0.244$, $p < 0.001$).
20. Staff responsiveness ($\beta = 0.217$, $p < 0.001$), communication effectiveness ($\beta = 0.189$, $p < 0.001$), hospital infrastructure ($\beta = 0.141$, $p = 0.001$), and administrative efficiency ($\beta = 0.118$, $p = 0.011$) also exerted significant positive effects on patient satisfaction.
21. All six hypotheses relating healthcare service quality dimensions to patient satisfaction were supported by the regression results.
22. The statistical evidence confirms that healthcare service quality dimensions collectively contribute to variations in patient satisfaction among patients receiving treatment in the selected private hospitals of Erode District.

6. Discussion

The present study examined patients' satisfaction towards services offered by selected private hospitals in Erode District by evaluating the influence of multiple healthcare service quality dimensions on overall patient

satisfaction. The findings provide important insights into the factors that shape patient experiences within private healthcare institutions and reinforce the growing importance of patient-centered healthcare delivery.

The results indicate that respondents generally expressed positive perceptions regarding the quality of services provided by the selected private hospitals. The relatively high mean scores recorded across all service quality dimensions suggest that the hospitals have been successful in delivering healthcare services that meet patient expectations. This observation supports the view that patient satisfaction is influenced not only by clinical outcomes but also by the quality of interactions and experiences encountered throughout the healthcare process (Donabedian, 1988; Naidu, 2009).

Among the various service quality dimensions, medical service quality emerged as the highest-rated factor and the strongest predictor of patient satisfaction. This finding indicates that patients place substantial importance on the competence of physicians, accuracy of diagnosis, effectiveness of treatment, and overall quality of clinical care. The result is consistent with earlier studies which reported that technical competence and treatment effectiveness constitute fundamental determinants of patient satisfaction because healthcare consumers primarily seek positive health outcomes from medical services (Andaleeb, 2001; Choi et al., 2005). The strong influence of medical service quality observed in the present study confirms that clinical excellence remains the core element of healthcare service evaluation.

Nursing service quality was identified as the second most influential determinant of patient satisfaction. Nursing personnel maintain continuous interaction with patients and play a critical role in providing emotional support, monitoring treatment progress, and ensuring patient comfort. The positive influence of nursing care suggests that patients highly value compassionate behavior, professional competence, and attentive service from nursing staff. This finding supports previous research which emphasized that nursing performance significantly contributes to healthcare quality perceptions and patient satisfaction (Chahal & Kumari, 2012; Meesala & Paul, 2018). The result highlights the

strategic importance of strengthening nursing competencies and patient-centered care practices within healthcare organizations.

Staff responsiveness also demonstrated a significant positive effect on patient satisfaction. Patients who receive prompt assistance, timely attention, and courteous treatment are more likely to report favorable healthcare experiences. Responsive healthcare delivery reduces uncertainty, improves confidence in service providers, and enhances perceptions of organizational efficiency. The present finding aligns with the responsiveness dimension proposed in the SERVQUAL framework and supports earlier empirical evidence that responsiveness represents a critical component of perceived healthcare quality (Parasuraman et al., 1988; Babakus & Mangold, 1992).

Communication effectiveness was found to significantly influence patient satisfaction. Effective communication facilitates patient understanding of diagnoses, treatment procedures, medication requirements, and recovery expectations. Clear and transparent communication helps reduce anxiety and strengthens trust between patients and healthcare professionals. The result corroborates the findings of Lim and Tang (2000), who reported that patients receiving adequate information and explanations exhibit higher levels of satisfaction. The significance of communication effectiveness further reinforces the need for healthcare providers to prioritize interpersonal communication skills alongside technical competence.

Hospital infrastructure was also identified as a significant determinant of patient satisfaction. Patients often evaluate healthcare institutions based on visible and tangible aspects such as cleanliness, availability of medical equipment, waiting facilities, accessibility, and environmental comfort. The positive relationship observed in the study suggests that modern infrastructure and well-maintained healthcare environments contribute meaningfully to favorable patient experiences. This finding is consistent with previous studies that emphasized the importance of physical evidence and environmental quality in shaping healthcare service perceptions (Berry & Bendapudi, 2007; Lee et al., 2000).

Although administrative efficiency recorded the lowest mean score among the service quality dimensions, it remained a statistically

significant predictor of patient satisfaction. This finding indicates that administrative processes such as registration, appointment scheduling, billing, and discharge procedures continue to influence patients' overall evaluations of healthcare services. Delays or procedural inefficiencies may negatively affect patient experiences even when clinical care quality remains high. Therefore, improving operational efficiency represents an important opportunity for healthcare institutions seeking to enhance service quality and patient satisfaction.

The Chi-square analysis revealed that age and educational qualification were significantly associated with patient satisfaction, whereas gender and occupation were not. The significance of age suggests that patients belonging to different age groups may possess varying healthcare expectations and service evaluation criteria. Similarly, educational qualification may influence awareness levels, information requirements, and perceptions regarding healthcare quality. In contrast, the absence of significant differences across gender and occupational categories indicates that patient satisfaction is largely influenced by service experiences rather than demographic distinctions.

The multiple regression model explained a substantial proportion of the variation in patient satisfaction, demonstrating that the selected healthcare service quality dimensions collectively provide a robust explanation of patient satisfaction levels. This finding supports the multidimensional nature of patient satisfaction proposed in healthcare quality literature and confirms that patients evaluate healthcare services through a combination of clinical, interpersonal, infrastructural, and administrative factors rather than relying on a single criterion.

Overall, the findings emphasize that patient satisfaction in private hospitals is shaped by a holistic healthcare experience encompassing treatment quality, nursing care, communication practices, staff responsiveness, infrastructure, and administrative support. Healthcare institutions that simultaneously strengthen these dimensions are more likely to achieve higher levels of patient satisfaction, improve patient retention, enhance organizational reputation, and maintain sustainable competitive advantage. The study therefore reinforces the importance of integrating

clinical excellence with patient-centered service delivery strategies as a foundation for continuous healthcare quality improvement.

7. Implications of the Study

The findings of the present study offer important implications for healthcare administrators, policymakers, healthcare professionals, and researchers concerned with improving service quality and patient satisfaction in private hospitals.

7.1 Managerial Implications

The study demonstrates that multiple dimensions of healthcare service quality significantly influence patient satisfaction. Among these dimensions, medical service quality emerged as the most influential factor. This finding suggests that hospital management should continue to prioritize clinical excellence through continuous professional development, adoption of evidence-based medical practices, investment in advanced diagnostic technologies, and regular monitoring of treatment outcomes. Strengthening clinical competence can enhance patient confidence and improve overall satisfaction levels.

The significant influence of nursing service quality indicates that nursing personnel play a vital role in shaping patient experiences. Hospital administrators should therefore focus on strengthening nursing competencies through regular training programmes, skill enhancement initiatives, patient-care workshops, and effective staffing policies. Encouraging compassionate and patient-centered nursing practices can contribute substantially to positive healthcare experiences. The positive effect of staff responsiveness highlights the importance of prompt service delivery and efficient patient support systems. Healthcare institutions should establish service standards that promote timely assistance, minimize delays, and improve patient interaction processes. Regular monitoring of service responsiveness can help hospitals maintain high standards of patient care.

Communication effectiveness was identified as another significant determinant of patient satisfaction. This finding emphasizes the need for healthcare professionals to provide clear, accurate, and understandable information regarding diagnosis, treatment procedures, medication instructions, and follow-up care.

Hospitals may benefit from implementing communication training programmes that strengthen interpersonal skills among healthcare providers and administrative personnel.

The significance of hospital infrastructure indicates that patients value clean, safe, comfortable, and technologically advanced healthcare environments. Continuous investments in facility modernization, hygiene management, patient amenities, and medical equipment can enhance patients' perceptions of healthcare quality and strengthen organizational reputation.

Although administrative efficiency demonstrated comparatively lower influence than other dimensions, its significant contribution to patient satisfaction suggests that hospitals should streamline operational processes. Simplifying registration procedures, reducing waiting times, improving appointment scheduling systems, and enhancing billing efficiency can contribute to a more satisfactory healthcare experience.

7.2 Policy Implications

The findings provide valuable insights for healthcare policymakers and regulatory authorities involved in healthcare quality improvement initiatives. The results indicate that patient satisfaction should be considered a key performance indicator for evaluating healthcare institutions. Regulatory agencies may encourage hospitals to conduct periodic patient satisfaction assessments and integrate patient feedback into quality assurance frameworks.

Healthcare accreditation bodies can utilize the findings to strengthen standards related to service quality, communication practices, patient safety, infrastructure development, and patient-centered care. Policies that promote continuous quality improvement and patient engagement may contribute to improved healthcare outcomes and enhanced public confidence in healthcare institutions.

Furthermore, the findings support the need for healthcare policies that encourage investments in workforce development, healthcare infrastructure, and digital health technologies capable of improving service efficiency and patient experiences.

7.3 Theoretical Implications

The study contributes to the existing healthcare management literature by providing empirical evidence regarding the multidimensional nature of patient satisfaction within private hospitals. The findings support established service quality theories, particularly the proposition that both clinical and non-clinical service dimensions influence patients' evaluations of healthcare services.

The study further reinforces the applicability of service quality frameworks in healthcare settings by demonstrating that medical services, nursing care, communication effectiveness, staff responsiveness, infrastructure, and administrative efficiency collectively contribute to patient satisfaction. The results strengthen the understanding of patient satisfaction as a complex construct influenced by a combination of technical, functional, interpersonal, and environmental factors.

Additionally, the findings extend existing knowledge within the context of district-level healthcare institutions in India, thereby contributing localized evidence to the broader healthcare service quality literature.

7.4 Social Implications

Improving patient satisfaction has broader implications for healthcare accessibility, patient trust, and community well-being. Healthcare institutions that consistently deliver high-quality services are more likely to strengthen public confidence, encourage treatment adherence, and promote positive healthcare-seeking behavior.

Patient-centered healthcare practices can contribute to improved health outcomes by fostering stronger relationships between healthcare providers and patients. Enhanced satisfaction may also encourage positive word-of-mouth communication, increasing community awareness and utilization of quality healthcare services.

Overall, the study highlights the importance of integrating clinical excellence, effective communication, responsive service delivery, supportive infrastructure, and efficient administration to create a healthcare environment that meets patient expectations and contributes to sustainable healthcare development.

8. Suggestions and Recommendations

Based on the findings of the study, the following recommendations are proposed to enhance patient satisfaction and improve healthcare service quality in private hospitals in Erode District.

1. Hospitals should prioritize continuous improvement in medical service quality through regular professional training, adoption of advanced medical technologies, and adherence to evidence-based treatment practices.
2. Greater emphasis should be placed on strengthening nursing care by promoting clinical skill development, compassionate care, patient safety, and effective patient interaction.
3. Hospital staff should be encouraged to provide prompt, courteous, and responsive services to ensure positive patient experiences and improve overall satisfaction.
4. Effective communication practices should be strengthened by providing clear information regarding diagnosis, treatment procedures, medications, and follow-up care.
5. Continuous investment in hospital infrastructure, cleanliness, patient comfort, and modern medical equipment is necessary to enhance patients' perceptions of service quality.
6. Administrative processes such as registration, appointment scheduling, billing, and discharge procedures should be streamlined to reduce waiting time and improve service efficiency.
7. Hospitals should establish regular patient feedback mechanisms to identify service gaps and support continuous quality improvement initiatives.
8. Patient-centered healthcare practices should be promoted by encouraging patient involvement in decision-making and addressing individual healthcare needs and preferences.
9. Quality assurance systems should be strengthened through periodic monitoring of service standards, patient outcomes, and satisfaction levels.
10. Continuous professional development programmes should be organized for healthcare personnel to enhance competence, service effectiveness, and patient confidence.

Overall, private hospitals should adopt an integrated approach that combines clinical excellence, efficient service delivery, effective communication, and patient-centered care to achieve higher levels of patient satisfaction and sustainable healthcare quality.

9. Conclusion

Patient satisfaction has become an essential indicator of healthcare quality, organizational effectiveness, and patient-centered service delivery in contemporary healthcare systems. The present study examined patients' satisfaction towards services offered by selected private hospitals in Erode District by investigating the influence of key healthcare service quality dimensions, namely hospital infrastructure, medical service quality, nursing service quality, administrative efficiency, communication effectiveness, and staff responsiveness.

The findings revealed that patients generally reported favorable perceptions regarding the services provided by the selected private hospitals. Among the various dimensions examined, medical service quality emerged as the most influential determinant of patient satisfaction, highlighting the importance of clinical competence, treatment effectiveness, and professional healthcare delivery. Nursing service quality and staff responsiveness also demonstrated substantial contributions to patient satisfaction, indicating that interpersonal interactions and supportive care play a crucial role in shaping patients' healthcare experiences.

The study further established that communication effectiveness, hospital infrastructure, and administrative efficiency significantly influence overall patient satisfaction. These findings confirm that patient evaluations of healthcare services extend beyond clinical outcomes and encompass multiple aspects of service delivery, including information sharing, environmental conditions, operational efficiency, and the quality of interactions with healthcare personnel.

The results of the Chi-square analysis indicated that age and educational qualification were significantly associated with patient satisfaction, whereas gender and occupation did not exhibit significant relationships. Furthermore, the multiple regression analysis confirmed that all six

service quality dimensions significantly contributed to patient satisfaction and collectively explained a substantial proportion of the variation in patients' evaluations of healthcare services.

The study reinforces the multidimensional nature of patient satisfaction and emphasizes that healthcare organizations must adopt a comprehensive approach to quality management. Focusing exclusively on clinical excellence may not be sufficient to ensure superior patient experiences. Instead, hospitals should simultaneously strengthen clinical services, nursing care, communication practices, infrastructure, responsiveness, and administrative systems to achieve higher levels of patient satisfaction.

From a practical perspective, the findings provide valuable insights for hospital administrators and healthcare professionals seeking to improve service quality and patient-centered care. Continuous quality improvement initiatives, workforce development programmes, effective communication strategies, infrastructure enhancement, and efficient administrative processes can contribute significantly to improving patient experiences and strengthening organizational performance.

In conclusion, the study demonstrates that patient satisfaction is influenced by an integrated combination of clinical, interpersonal, administrative, and environmental factors. Private hospitals that successfully align these dimensions with patient expectations are more likely to enhance service quality, strengthen patient trust, improve healthcare outcomes, and sustain long-term competitiveness in an increasingly demanding healthcare environment. The findings therefore contribute to the growing body of healthcare management literature and provide a useful foundation for future research and quality improvement efforts within the healthcare sector.

10. Limitations of the Study

While the present study provides valuable insights into patients' satisfaction towards services offered by selected private hospitals in Erode District, certain limitations should be acknowledged when interpreting the findings. First, the study was confined to selected private hospitals located within Erode District. Consequently, the findings may reflect the

specific characteristics of the hospitals included in the investigation and may not be directly generalizable to all private hospitals in other districts, states, or healthcare settings with different organizational structures and service environments.

Second, the study employed a cross-sectional research design in which data were collected at a single point in time. Patient perceptions and satisfaction levels may change over time due to variations in healthcare experiences, service improvements, technological developments, and changing expectations. Therefore, the study captures respondents' evaluations only during the period of data collection.

Third, the investigation relied primarily on self-reported responses obtained through a structured questionnaire. Although respondents were encouraged to provide honest opinions, self-reported data may be influenced by personal perceptions, recall limitations, temporary emotional conditions, or response bias. Consequently, the findings represent perceived satisfaction rather than objective assessments of healthcare performance.

Fourth, convenience sampling was adopted for selecting respondents from the participating hospitals. While this approach facilitated data collection from patients who were readily accessible and willing to participate, it may limit the representativeness of the sample and introduce sampling bias.

Fifth, the study focused on selected dimensions of healthcare service quality, namely hospital infrastructure, medical service quality, nursing service quality, administrative efficiency, communication effectiveness, and staff responsiveness. Other factors that may influence patient satisfaction, such as treatment costs, health outcomes, insurance coverage, accessibility of services, patient safety practices, waiting time, cultural expectations, and psychological factors, were not examined within the scope of the present investigation.

Sixth, the study concentrated exclusively on patients receiving services from private hospitals. As a result, the findings cannot be generalized to public hospitals, government healthcare institutions, charitable hospitals, or other healthcare delivery systems that may operate under different administrative and service conditions.

Finally, although the statistical analyses provided meaningful evidence regarding the relationships among the study variables, the results should be interpreted within the context of the selected sample and study setting. The identified relationships indicate associations and predictive influences but should not be interpreted as definitive causal relationships.

Despite these limitations, the study provides useful empirical evidence regarding the determinants of patient satisfaction in private hospitals and contributes meaningful insights for healthcare administrators, practitioners, policymakers, and researchers interested in healthcare service quality and patient-centered care.

11. Scope for Future Research

The present study contributes to the understanding of patient satisfaction in private hospitals; however, several opportunities remain for further investigation. Future studies may undertake comparative analyses between private and public healthcare institutions to identify variations in service quality perceptions and satisfaction levels. Research may also be extended to other districts and states to enhance the generalizability of the findings across diverse healthcare settings.

Longitudinal studies could provide deeper insights into changes in patient satisfaction over time and the impact of evolving healthcare practices. Future researchers may incorporate additional variables such as waiting time, treatment cost, patient safety, healthcare accessibility, trust in healthcare providers, and telemedicine services to develop a more comprehensive understanding of patient satisfaction.

Furthermore, advanced analytical approaches, including Structural Equation Modeling (SEM), may be employed to examine complex relationships among service quality dimensions and satisfaction outcomes. Future investigations may also explore the influence of patient satisfaction on behavioral outcomes such as patient loyalty, revisit intention, and positive word-of-mouth communication. In addition, qualitative and mixed-method research designs could provide richer insights into patients' experiences, expectations, and perceptions of healthcare services.

Overall, future research should focus on broader geographical coverage, additional service quality determinants, and advanced

methodological approaches to strengthen the understanding of patient satisfaction and healthcare service quality in diverse healthcare environments.

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