

Service quality of healthcare system and satisfaction of individuals

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Investment in health has become the need of the present time because the more it is in health, the more the state, the country and the state will move on the same path of economic development. At present, the need of Rajasthan is also the same. Per capita health expenditure in India was ₹ 3174 in 2013-14, it increased to ₹ 3503 in 2016 and decreased to ₹ 3314 in 2018-19.

It is well known that the person's share on health in India is borne by the resident here, according to an estimate, India is between 60 to 70% of this borne. At present, after the Corona period, the state of India and Rajasthan are taking a serious attitude towards government health. Special step has also been taken in the context of giving "right to health" in the state of Rajasthan. How effective this special step is, it will be known in the coming time. As far as the investment in health and the person's satisfaction is concerned, it will be necessary to know the opinion of the people of Rajasthan. This is the topic of this paper, because how effective the investment in health is, will depend on the level of satisfaction and it will give direction to the investment. I am doing my research on this appropriation topic.

As far as health satisfaction is concerned, it has some elements like gender, age, employment status, education level, waiting time doctors communication behaviour and level of trust and distance of health facilities, effective health facilities in rural areas etc. We have included 500 people from the state of Rajasthan and tried to know their views about the health services provided by the government and private sectors.

Keywords :

individual satisfaction, rajasthan, investment in health, service quality of healthcare

Objectives:

1. The main objective of the research paper is to establish a relationship between the investment of health and the level of satisfaction of individuals.
2. The second objective is to assess the investment being made in the health sector by the government and the private sector.
3. At the same time, there is also a need to know the burden of doing health by private persons.

Review of literature:

Not much work has been done in Rajasthan in the context of the above topic, which should give a direction to this research literature. Even after that, many such research has been done, which provides guidance to the above topic. In which the first place is the research done in Karnataka. Sathyanarayana & Shenoy (2019) in the research paper "Service Quality and Patient Satisfaction: Primary Health Care Centres in Rural Karnataka" highlights the management of primary health care services in developing countries like India .

Similarly, in 2016, Sirohi and Singh presented a research paper on the topic “Service Quality Evaluation of Private Hospitals using SERVQUAL”, in this research paper the level of satisfaction of patients has been measured on the basis of facilities provided by government and private sector.

In 2020, Naveed has also presented the task of measuring the satisfaction of individuals or patients in his research paper "Patient Satisfaction Through Modified Cervical" model, in this research paper, Naveed has included all 6 dimensions in his research paper, including the responsiveness, reliability, empathy, assurance, tangibility and usability etc. were included and in this research paper it was revealed that the patient's satisfaction plays a very important role in this regard and it has been shown that the satisfaction of the patient or persons with the facilities of his health. also affects investment.

Hypothesis:

Ho: There is no significant relationship between the investment on health and satisfaction of individuals.

Ha: There is significant relationship between the investment on health and satisfaction of individuals.

Limitations :

Research has some limitations, these limitations are as follows:

1. The purpose of the research topic is very wide, which has been done on 500 people only.
2. The data collection method is based on primary data, so its assessment has been reduced.
3. The sample size has been taken small to justify the problem.
4. The relevant area of research has been Rajasthan and 500 people from its division were included.
5. The inclusion of earlier research papers for literature review has been reduced because very little literature review has been received related to it.
6. While collecting the data, a problem arose that many respondents did not show the data and facts correctly.

Research methodology :

The methodology under which primary data was collected was used to elucidate health input and personal satisfaction. A Questionnaire was created in the collection of primary data, in this query, their response from 500 Respondent was recorded. Linkert scale method was used to construct the questionnaire. In which 30 questions related to patient satisfaction were asked, 30 questions were asked on the basis of Strongly Agree, Agree, Neutral, Disagree and Strongly Disagree. Mixed method was created for the question of respondent and methods like ANOVA, multiple regression, correlation etc. were used for data interpretation and hypothesis was fulfilled.

Data interpretation :

Ho7: There is no significant relationship between the investment on health and satisfaction of individuals.

Ha7: There is significant relationship between the investment on health and satisfaction of individuals.

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.193 ^a	.037	.032	2.48182

a. Predictors: (Constant), SEM

Table : 6.3.24 model summary

This table given the R-value which is represented the correlation between the observed value and predicted value of the dependent variables. Here the value of R-square is 0.037 that means the independent variable of model can be predicted 37% of the variance is dependent variables

ANOVA^a

Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	49.163	1	49.163	7.982	.005 ^b
Residual	1275.007	838	6.159		
Total	1324.170	839			

a. Dependent Variable: Sumattitude

b. Predictors: (Constant), SEM

The above table gives the test result for the analysis of ANOVA. The results are given in three rows. F value in this case is 7.982 and the P-value is given by 0.005 which means this alternate hypothesis is accepted.

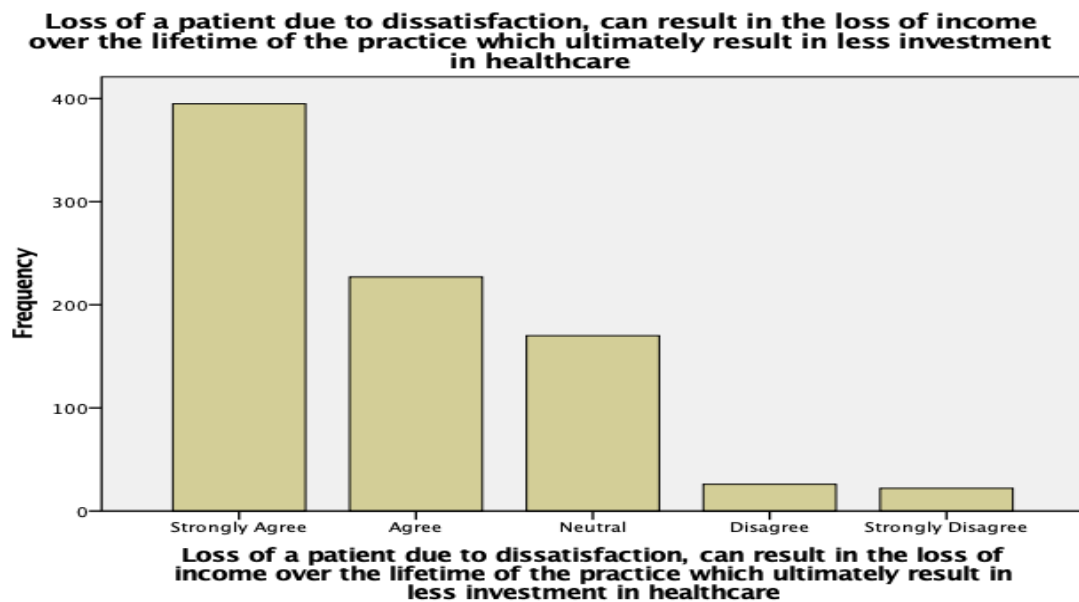
Coefficients^a

Model	Unstandardized Coefficients		Standardized Coefficients	t	Sig.
	B	Std. Error	Beta		
1 (Constant)	5.601	.709		7.896	.000
SEM	-.740	.262	-.193	-2.825	.005

a. Dependent Variable: Sumattitude

table : 6.3.26 coefficient

The above table gives the regression constant and coefficient and their significance. Now by testing hypothesis the p-values for regression coefficient is .005 which is less than 0.05. Therefore, the alternate hypothesis is relevant and accepted which means there is significant relationship between the investment on health and satisfaction of individuals.



Result :

According to the study there is a strong relationship between investment on health and satisfaction of individuals. Null hypothesis rejected and alternative hypothesis accepted. Other outcomes are as follows:

- 16.5% said that they SA, 49.5 % said that they A but not strongly, 23.8 % preferred to remain N, 7.0 % said that they disA but not strongly and 3.1 % said that they SD thus majority of the respondents A that A satisfied patient is a practice builder". Patient satisfaction leads to more investment in health care.
- 45.7% said that they SA, 22.0 % said that they A but not strongly, 24.9 % preferred to remain N, 4.8 % said that they disA but not strongly and 2.6 % said that they SD thus majority of the respondents SA that Patient satisfaction leads to Improved patient retention which will bring more investment in healthcare.
- 47.0% said that they SA, 27.0 % said that they A but not strongly, 20.0 % preferred to remain N, 3.1 % said that they disA but not strongly and 2.6 % said that they SD thus majority of the respondents SA or A that Loss of a patient due to dissatisfaction, can result in the loss of income over the lifetime of the practice which ultimately result in less investment in healthcare.

Conclusions:

According to study we find the positive relation between health expenditure and satisfaction. Therefore Central and state governments should not do more and more in health, so that personal satisfaction should be promoted and its positive effect is visible on economic development.

References :

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