

Impact of Service Quality Factors on Patient Satisfaction: An Empirical Study of Health Care Service in Nawabshah Pakistan

Sadia Akhund ^{1*} | Zeeshan Abid ² | Muhammad Asif Qureshi ³ | Laiba Yousaf ⁴ |

^{1*} Ph.D. Scholar, Mehran University
of Engineering and Technology
(MUET), Jamshoro, Pakistan
muistd06@gmail.com

² Shaheed Benazir Bhutto University
Shaheed Benazirabad, Pakistan
17bba69@student.sbbusba.edu.pk

³ Associate Professor, Head
Research and Business Solution
Centre
Bahria Business School
Bahria University Karachi Campus,
Pakistan
qureshimuhammasif@gmail.com

³ Aix-Marseille Graduate School of
Management, University in Aix-en-
Provence, France
Yousaf.laiba@iae-aix.com

Article History

Received: 07-09-2024
Accepted: 15-12-2024
Online: 23-12-2024

ABSTRACT:

Health care sector is an important sector of economy. Countries who have a strong research and development have influential impact and reputation on other countries. Because patients who belong to any region only believe in those products and services that provide good healthcare. The healthcare system aims to meet the needs of its population in a distinct social and cultural manner. Its primary goal is to provide unbiased care. Patient or customer satisfaction is shaped by an individual's perceptions, which encompass both expectations and experiences. This study comprises of factors which are affecting patient satisfaction such as service quality, access mechanism, physician behavior, skill and patient satisfaction. This study demines that how strongly these variables influence on patient satisfaction. For this purpose, the data were collected from Nawabshah and the sample data was collected from various university's students, employees, and doctors. Total questionnaires were 244 and it was founded that positive correlation among patient satisfaction, service quality, and access mechanism, physician behavior and skills with patient satisfaction and significant. So the findings of the study show that if servicer quality, access mechanism, physician behavior and skills in health care sector are improving then the patients tent toward are satisfied and their experience toward healthcare institutes would be increased, so this study shows that these factors or variables such as access mechanism, physician behavior and skills, service quality are the factors that influence the patient satisfaction level.

Keywords: Service Quality, Access Mechanism, Physician Behavior and Skills, Patient Satisfaction.

1. Introduction

In today's competitive environment, with a growing population and increasing concerns about healthcare issues, there is a heightened emphasis on development across various sectors of the economy to achieve competitiveness. Consequently, patient satisfaction and service quality have garnered significant interest among researchers and scholars worldwide. In addressing healthcare issues related to patient satisfaction, countries are not only enhancing their health sectors to serve better communities but are also generating revenue to support health tourism (Han and Hyun, 2015). Emerging countries can also reap these benefits by providing high-quality healthcare at reasonable costs. Due to competition in the market, the services offered within the same industry are improving, prompting the industry to differentiate their service delivery and establish strong positioning through various communication channels. There is an additional need to focus on service quality, which must be managed carefully to ensure it is promoted effectively while considering the culture and norms of other nations. The best services are those that understand the needs of the international market and the trends of consumers in those regions. Adjustments may be necessary when transitioning from one country to another, as services must be tailored to meet customer requirements. The healthcare industry is highly competitive, particularly with the rise of the private sector, making the competitive landscape. This competition has compelled private hospitals to compete for market share, leading many to place greater emphasis on marketing strategies to attract more patients. In Pakistan, numerous studies in the healthcare sector focus on evaluating the quality of public services and the perceptions of private hospitals. This research also delves into various scales that help gauge patient satisfaction levels by correlating them with different variables. A

comprehensive conceptual model is developed to understand and measure how these variables influence patient satisfaction. In today's healthcare landscape, one of the main concerns revolves around patient/customer satisfaction, particularly as individuals face a multitude of options when selecting a healthcare provider. The diversity of choices makes quality and service critical factors in the decision-making process. For many, quality customer service in healthcare is a well-recognized standard. However, the healthcare sector is frequently evaluated for its dedication to quality and patient-centered care, both of which are important factors for consumers when selecting a provider (Stavins, 2006). The cost of healthcare has an indirect impact on patient satisfaction. Following cost, the behavior of physicians, along with their technical and interpersonal skills, significantly influences patient satisfaction, as patients are directly affected by these factors. Thus, quality, cost, skills, and behavior are all elements that directly and indirectly shape customer satisfaction and loyalty (Saeed et al., 2013). Each country has its own healthcare system tailored to meet the unique social and cultural needs of its population. The primary goal of any healthcare system is to provide equitable care. Patient or customer satisfaction is shaped by individual perceptions, combining expectations and experiences. Over the past two decades, the measurement of customer satisfaction in healthcare services has been increasingly emphasized. Satisfaction among patients is the most significant constituent of quality of health care, which demonstrates its ability to fulfill needs and expectations. Most of the results of assessment concerning the level of satisfaction among patients/clients as well as that of the health care system, in the leading countries of the world, serve as the most reliable indicators of the quality of healthcare that fully meets characteristics and features of the services received. Assessing patient

satisfaction is important in many fields. Literature indicates that satisfied patients are more cooperative and compliant with caregivers and medical regimens (Naseer, 2012). Understanding patient satisfaction and characteristics linked with dissatisfaction can help countries indicate deficiencies in their health-care systems, allowing improvements to be adopted to improve population health. Patient satisfaction surveys give feedback regarding health care, motivate hospitals and physicians, and improve their services and efforts. It increases patient safety while lowering healthcare costs. It is also utilized to assess the performance of various healthcare systems throughout the world and to figure out the best practices of providers in satisfying patient expectations while also enhancing the needs and services of their health care systems (Naseer, 2012). Pakistan is the world's sixth most populous country, a welfare state, meaning that the government is responsible for providing food, shelter, clothes, healthcare, and education. The Government of Pakistan has established, in consonance with the 1978 Alma-Ata Declaration, a comprehensive system of primary health care services aimed at making quality, effective, and affordable healthcare services available to all by establishing a well-defined network of primary health care facilities. The cost is based on what the country and region can afford. Pakistan's healthcare system is a hybrid type that includes public, private, and non-governmental healthcare sectors. Survey conducted in 1998, explores the tenancy rate of public health institutions does not exceed 21%, while 79% of the population uses private health institutions, which are the main form of healthcare. The informal healthcare sector (30%), which includes Hakims, Greek healers, witch doctors, and people who claim to have healing knowledge but do not. Low utilization of public sector health services has several reasons

and consumer dissatisfaction with governmental provided health facilities, one of the major reasons is the shortage of doctors and medical staff due to lack of work and lack of basic and essential supplies.

Medicines and others: Beautiful Pakistan currently spends 0.55% of its GDP on the health sector, despite illiteracy, cultural issues, poverty, lack of trust and satisfaction of patients in government healthcare facilities, physical disabilities, and lack of political will, poor infrastructure and sanitation are all factors that affect health sector spending.

Reasons for reduction: They are responsible for public health facilities (Naseer, 2012). Patient satisfaction is one of the many factors contributing to underutilization of government healthcare facilities in Pakistan that has yet to be investigated. Although it is not a new notion, the government has shown little willingness to incorporate patient input and suggestions into the delivery of services in accordance with patient expectations. A recent study found that patient satisfaction with government health facilities has decreased and use of private health facilities has increased across all income quintiles. A study conducted in Pakistan determined patient satisfaction in outpatient, and emergency clinics. There is no data available to represent the graph of patient satisfaction at a national level. However the local level studies done on a customer satisfaction in health care services in different parts of country show less interest of public towards in government healthcare facilities than the private ones (Javed and Ilyas. 2018). A key component of the idea of patient happiness is the expectations that patients have of the healthcare system and the people who provide it. The patient measures his or her expectations for healthcare services and compares them with his/her own experience, which helps the healthcare professional to determine how satisfied the patient is. When used as a quality measurement

technique, expectations intensify the concept of satisfaction. Three categories of expectations are identified in current literature, these are:

1. Clear background expectations that come from a body of knowledge about the consultation and treatment processes.
2. Expectations for interactions lead to expectations for the information sharing between the patient and the healthcare professional.
3. Action expectations are regarding what a doctor will do; examples include the prescription of a medication, the medication's outcome, and a doctor's advice.

Patients are more likely to alter their experience as they gain more experience because they have varying expectations depending on their prior experiences and information. A cross-sectional survey conducted at Civil Hospital Karachi outpatient department, patients with lower expectations consistently score higher on satisfaction indicators than the others. According to surveys of patient expectations in Pakistan, patients expect their doctors and other paramedical staff to provide them with emotional support, listen to them patiently, explain and comprehend the disease process, provide accurate and pertinent information, provide proper treatment and diagnosis, prescribe medications, order enquiries, and refer them to specialists. Other expectations found in Pakistani patient expectations surveys include consultation times exceeding 20 minutes and waiting times in the hospital emergency and outpatient departments of less than 30 minutes. Patient features including sex, age, and marital status, and psychological factors influence these expectations (Naseer, 2012). It is crucial for businesses to fully satisfy their clients in any kind of market. Customers that are happy with their

purchases tend to come back and make additional purchases, and they also tell others about their positive experience. As a result, he could have to pay extra for the opportunity to buy from the reliable vendor. According to corporate law and research, acquiring a new client is ten times more expensive than retaining an existing one. Gaining a new client is therefore an indication that a firm is profitable and valuable. Because the consumer is crucial to the market. Over the past 20 years, the medical community has paid more attention to healthcare providers, patients, and consumers. Since it concerns patient happiness, there isn't a universally accepted definition. Although there isn't currently agreement on a definition, many have attempted to provide one by putting out or evaluating numerous possibilities.

1.1 Problem statement:

These are all the problems that are affecting customer satisfaction in health care services and the solution of the problem of customer satisfaction is in hospitals managements hand and in the hands of government as they control vast number of hospitals in state. Both the management of hospital and the state government have to focus on the services provided in the hospitals, quality in the services provided, hospital features, staff satisfaction and insurance and with the betterment in the services and quality automatically the patient attributes will get solved as they go through with their treatment as expected as it is patient expectations concern, further the patient is required to take good care of his/her own self to remain satisfied.

1.2 Research questions:

Q1: In the context of Pakistani healthcare, how do factors pertaining to healthcare service excellence affect patient satisfaction?

Q2: Do the dimensions of healthcare services have any gaps in their value?

Q3: How do the values of healthcare facilities, physical location, welcoming communication, environment care, privacy and responsiveness relate to patient loyalty?

1.3 Goals of the research:

- The first goal is to identify the factors influencing patient satisfaction.
- Linking patient involvement in healthcare services is another goal.
- The third goal is to ascertain whether the cost has a direct impact on patient satisfaction.

1.4 Significant of the study

As the healthcare sector has become one of the most important sectors of the world for the peoples to survive and it is very much important for healthcare sector to get improved and everyone is supposed to must understand and go through with the knowledge needed for the betterment of the healthcare sector and both the officials and individuals will get help from the study to make the healthcare sector better and both patient attributes factors and health system factor will get help to make the system of healthcare better.

2. Literature Review

Healthcare as the quality of the aid as the application of all the services of modern scientific medicine necessary for the needs of the population (Javed and Ilyas. 2018). Further, it described patient satisfaction as an evaluation of distinct healthcare dimensions. In the early 60s, using the concept introduced in the industry, the quality was defined as the degree with which the assistance complies with good medicine criteria (Donabedian, 1966). Similarly, Tucker and Adams in their research suggested that patient satisfaction is anticipated by factors connected to empathy, caring, responsiveness and reliability (Boshoff and Gray, 2004). Satisfaction of a patient can be described as a judgment made by a care recipient about whether their expectations for care have

been met or not. (Palmer et al., 1999). Patient satisfaction has long been considered a fundamental component when measuring health outcomes and quality of care (Saeed et al. 2013). The importance of the patient's opinion and his perception of treatment and care at health facilities are now recognized in all developed systems of healthcare. The most rapid growing industry now a days is healthcare industry. During that time, health officials recognized that customer satisfaction was crucial for improving profitability and ensuring long-term success. This realization stemmed from several factors, including the need to monitor changing cost structures, competitive pressures, and the influence of private groups (Saeed et al. (2013). Over the past several decades, the issue of patient or customer satisfaction has gained increased attention from executives across the healthcare industry. As an outcome, industry managers have been concentrating their attention on enhancing patient/customer gratification through numerous initiatives. Despite their many successes and efforts, it is evident that more work in this field of study is still needed (Javed and Ilyas. 2018). Recently, the concept of healthcare satisfaction has been given much greater significance particularly in the market based health systems. Moreover, in WHO World Health Organization's basis for health care assessment, the customer satisfaction is given due deliberation. A main objective of traditional public and health organizations was to emphasis on public or people choice theory. This kinds of theories previously has been one of the most significant bodies of theory in the improvement of traditional public administrations. One of the underlying assumptions of public or people choice theory is that human actions is motivated by individual's self-interest (Parker, Ryan, & Brown, 2000). It is considerable customer changes have taken place and competition is increasing (Stavins, 2006). Similarly

Woodside identified other primary patient satisfaction determinants: Food; nursing care; discharge, admissions; technical services and housekeeping (Javed and Ilyas. 2018). Communication in field of healthcare is described as the degree to which the patient is heard, kept informed through understandable relations, afforded interaction and consultation time and provided psychological and non-technical material. Saeed (2013) emphasized that effective communication, particularly the provision of clear information from service providers to patients regarding the care they will receive, significantly reduces uncertainty and enhances patients' awareness and expectations, thereby improving overall patient satisfaction. Similarly, Boshoff and Gray (2004) found that satisfaction with specific service dimensions, such as the nursing team, charges, and meals, had a constructive influence on patient satisfaction, with satisfaction with the nursing team exerting the strongest impact. Conversely, satisfaction with administrative, reception, and ancillary services was deemed less influential on customer satisfaction. Their findings align with the framework proposed by Parasuraman et al. (1988), who identified physical attributes such as hygiene, modern equipment, and a well-maintained hospital environment as critical determinants of patient satisfaction. However, perceived high hospital costs were found to negatively affect satisfaction levels. These studies collectively highlight the connections within the healthcare system, ranging from direct physician-patient interactions to broader networks involving insurers, employers, retailers, diagnostic systems, and alternative service providers. Research by Javed and Ilyas. (2018) underscores how these interlinked actors and touchpoints contribute to either positive or negative patient experiences, while also noting the perceived risks patients may associate with disclosing personal information

within the healthcare value chain. Lastly, Parasuraman et al. (1988) proposed that the physical environment where services are delivered plays a pivotal role in shaping customer service performance evaluations and influencing overall satisfaction. User fulfilment is a very significant part of any medical practice, so it is imperative to consistently undertake surveys in the community or facility to introduce better services (Boshoff and Gray, 2004). The issue of patient happiness is one of the main concerns in the healthcare sector. Nowadays, when choosing a certain healthcare provider, people have a lot of options to choose from. Therefore, one of the most important factors for people to consider when choosing a healthcare facility provider is the reputation of the firm for its dedication to value and patient-centered customer facilities (Stavins, 2006). An important factor influencing patient satisfaction in healthcare is the anticipation. Patients have based on comparisons of services received from different healthcare providers. Patients expect clear guidance, even for processes in which they are not directly involved. A key determinant of patient satisfaction is the tangible outcome of medical services, particularly improvements in health as a result of the care or medication provided by physicians. Patients who experience positive health outcomes are more likely to report higher satisfaction levels. In Pakistan, particularly in government hospitals operating under federal directives, there is minimal focus on the quality of access mechanisms. Service quality remains the most critical determinant of customer satisfaction and comprises two primary dimensions: technical quality and functional quality. Technical quality pertains to the effectiveness of medical treatments, while functional quality relates to how services are delivered. The behavior and interpersonal skills of doctors, as well as the attitude of other healthcare professionals such as nurses, play a pivotal role in shaping patient

satisfaction. Positive interactions that are courteous, empathetic, and caring contribute significantly to patient satisfaction, whereas a lack of professionalism or empathy may lead to dissatisfaction (Spector, 2001). Although the existing literature endorses the multidimensionality of the consumer consummation construct, there is no identified general agreement about the nature or gratification of the consumer gratification measurements; patient satisfaction stands as a significant matter both for the valuation and development of healthcare services. The current study is also an attempt to explain and collect factors from patients in order to elaborate on the current dynamics of healthcare satisfaction among patients. The concept is that the health-related sector is making progress rapidly nowadays, and the competition among healthcare services providers are increasing because in their field, they face different challenges, such as their competitor's strategy and competitive pressure and different changing cost structures among competitors such as the public and private sectors. Nevertheless, the data indicates that further work is still required in this field despite its numerous initiatives and achievements (Achee, 2006). Expectations are another factor, as clients describe their experiences receiving treatments from various healthcare providers. The actual results of the services provided by the doctor are a crucial component of healthcare customer satisfaction; as a result, patients get well or improve, and they are more likely to express happiness with the treatment or drugs they receive.

2.2 Variables in Literature

There are variations that affect customer satisfaction such as quality of service, delivery method, expertise and doctor behavior because these variables are more important than other variables in Pakistan (Spector, 2001). According to

Campbell et al. (2000) the cost of service providers if the patient thinks they are paying for the services they receive from the doctor, but the public sector has less resources and therefore does not meet the costs and reduces it (Leonard C. McLean, 2001). Doctor is the major factor in shaping the customer satisfaction might be the doctor's attitude and depends on the treatment that the patient receives from doctors, nurses, and additional healthcare qualified which supposed to satisfy or dissatisfy their patients as well because patients need, and should think to receive, professional care that is well-mannered, polite, kind and empathetic.

2.1 Service Quality

Campbell et al. (2000) defined "quality of healthcare services as the judgment of patients or the perception of the overall excellence and superiority of a healthcare unit. These perceptions about the quality of service are important these days, as it is practically possible to enhance its implementation and continuity in order to achieve better health outcomes for patients. For most people, health concerns are of the most importance, and their decision to continue or discontinue their healthcare services strongly influences their expectations of healthcare quality characteristics (Achee, 2006). When assessing the quality of services, customers take into account a number of factors, including the physical environment and the staff's responsiveness to their needs ((Ryu & Ho, 2003). A growing number of businesses are aware that preparing happy clients with superior services is strategically important for gaining a competitive edge as competition heats up everywhere ((Ryu & Ho, 2003). In the health care system (Naidu, 2009), reducing the importance of these critical issues can be terrifying for hospitals in the long run.

2.3 Access Mechanism

Access mechanism is the controlling system of the hospital, and the treatment procedure of the

hospital communication system and the flow of information and facility stated as an access mechanism in the hospital that may satisfy a patient who they supposed to gain in the hospital (Zinelden, 2006). In terms of the number of medical facilities related to sensitive data, hospital safety is subject to strict regulatory compliance standards, training of special security personnel, clear policies and procedures, and the installation of functional access control devices in which patients and medical Staff requirements must be met. The improvement in the quality of staff and operating machines and the treatment system takes as an access mechanism and also the internal environment of the hospital, the technical skills of the staff, the expenses of the institution, the washroom facilities, and the seating arrangement of the hospitals, and most importantly the emergency treatment of the hospital they all consider as an access mechanism of the hospital.

2.4 Physical Behavior and Skill

Physicians' behavior is also an important part of patient satisfaction. The medical knowledge of a physician is essential for patient care, and will be one of the unique medical practices (Ryu & Ho, 2003), and physician behavior and skill are also the main elements that make worth of the hospitals and satisfactions.

2.5 Patient Satisfaction

Patient satisfaction is a widely studied concept in the healthcare literature, frequently highlighted as a critical outcome measure in quality improvement research. It is defined as the consumer's perception of satisfaction within the healthcare sector and is one of the most commonly reported indicators of care quality. Shabbir et al. (2016) emphasized patient satisfaction as a vital component of healthcare service quality and a key indicator of healthcare success. Gregorodis (2014) identified expectations, performance, and loyalty as essential dimensions for measuring customer satisfaction.

2.6 Determinants of Patient Satisfaction

Donabedian's framework is widely recognized for its emphasis on incorporating selected indicators to assess patient satisfaction as a measure of healthcare outcomes. These indicators are categorized into three dimensions: structure, process, and outcomes. Structural indicators encompass both medical and non-medical elements, including healthcare infrastructure such as trained medical professionals, paramedical staff, and the availability of appropriate equipment, which collectively support the delivery of care within the healthcare system.

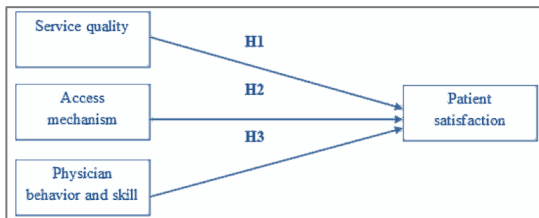
2.7 Role of Health-Care Service Value in Influencing Patient Satisfaction

Patient satisfaction serves as a measure of various dimensions of healthcare delivery (Naidu, 2009). The dimensions encompass essential services, professional reputation, specialization, communication, competence, admissions, outpatient care, nursing services, food quality, domestic assistance, and technical support. According to Naidu (2009), the effective integration of these elements significantly enhances patients' perceptions and overall satisfaction. By delivering a consistently superior experience that is difficult for competitors to replicate, healthcare institutions can establish a unique competitive advantage. Furthermore, this approach contributes to building organizational capacity, positioning the hospital as a leader in service quality. Therefore, the strategic management of these healthcare quality dimensions is crucial in shaping and positively influencing patients' perceptions, ultimately reinforcing the institution's competitive standing.

3. Research Framework

Various studies have been accomplished to determine the links between healthcare services and patient satisfaction (Fatima et al., 2018). Through the quality of healthcare service, patient satisfaction and patient loyalty are examined.

Aspects of the quality of healthcare service quality, such as physical environment, consumer-friendly environment, and access mechanism. Communication, privacy and safety, and behavior and skills of doctors all are covered in three variables, which are service quality, access mechanism, and physician behavior and skill, as shown in (Figure-1).



3.1 Hypotheses / Research Questions

There is only one dependent variable in this study, which is patient satisfaction that operates on various other independent variables. Different researchers indicate that service quality is directly linked to physician performance as well as customer satisfaction, as quality is the key factor that affects other variables. Secondly, the behavior of doctors is very important because the behavior leads to the level of satisfaction of the consumer, so based on the literature review different assumptions or hypotheses are made.

H1: There is a positive relationship between service quality and customer satisfaction.

H2: There is a positive relationship between access mechanism and customer satisfaction.

H3: There is a positive relationship between therapist skills and patient satisfaction.

3.2 Research methodology

3.2.1 Research Design:

The conducted study is based on quantitative analysis because it has provided an accurate estimation of a number of factors affecting customer satisfaction in the health care system in Nawabshah and the causal relationship between different variables. Besides, this study was

informal, and participants found easiness in providing responses. Furthermore, this study seemed to be good for elimination bias. The strategy and framework that the researcher(s) have done is casual research as the main causative factors have been recognized that are affecting the people and patient satisfaction in healthcare services in Nawabshah, including public and private sectors.

3.2.2 Population and sample size

It is witnessed that a large number of people face various problems in the provision of health care Services in Nawabshah city so this study has been done through random sampling methods.

3.2.3 Sample size

Nearly two hundred and forty-four people were taken in this study from People's University of Medical and Health Science for Women (PUMHSW) Hospital and private sectors for random sampling.

3.2.4 Data Collection Procedure

In this study, data has been collected by means of questionnaire used in surveys from PMC and different private clinics by using random sampling. Moreover survey research technique has practiced because this method was quick, immediate, and cost effective with accurate scale sources (Achee, 2006). Questionnaires were distributed to admit inpatients as well. Both men and women, who stayed at least once a night in hospitals as well as in regular visits to seek health care services. Whereas primary data were collected by means of questionnaires to get response from patients' feedback and expectations of the quality of service provided by hospitals. The variables were measured through a five point "lake type scale.

3.2.5 Instruments and measures:

The study instrument (questionnaire) is comprised of three parts. Five -point Likert scale has been used.

3.3 Data Analysis Method

Different analytical procedure has been used in this study like descriptive statistic for analyzing demographic factors, reliability test used to check the accuracy of data with that situation. Besides this, correlation method was used to analyze the relationship between different variables. Furthermore, regression analytical method is used to estimate the relationships between dependents and independent variables with p value.

4. Results

This part contains the explanation on the basis of the collected data, i.e., the reliability of the instruments which was used in the research study also debated. At last about the correlation and regression results are deliberated in detail with explaining of hypotheses of the research study.

Frequency

	Frequency	Percent	Valid Percent	Cumulative
Male	132	54.1	54.1	54.1
Female	112	45	45.9	100
Total	244	100.0	100.0	

From the overhead table of frequency, it is showing the percentage of male and female. In this research there is total number of respondents are 244, from which the frequency of male is 132, and it forming a percentage of 54.1 and the frequency of female is 112, and it is forming a percentage of female is 45.9 percent and there commutative is 100.

4.1 Reliability Test

Table 2: Reliability Statistics

Cronbach's Alpha	Number of items
.712	4

The overhead table no 2 is showing the reliability of the first independent variable service quality and there are four items (4) for measuring the service quality, and the Cronbach alfa value is 0.712 which is reliable because there value is greater than their standard value is .60 Which showing the reliability of questions regarding to service quality in the study of Mittal, and Lassar, (1998).

Table 3: Reliability Statistics

Cronbach's Alpha	Number of items
.700	10

The overhead table no 3 is showing the reliability of second independent variable Access Mechanism and there were ten items (10) for measuring the Access Mechanism, and the Cronbach alfa value is 0.700 which is reliable because there value is greater than their standard value is .60. Which is showing the reliability of questions regarding to access mechanism in the study of Zinelden, (2006).

Table 4: Reliability Statistics

Cronbach's Alpha	Number of items
.654	7

The overhead table no 4 is showing the reliability of third independent variable which is Physician Behavior and Skill and there were seven items (7) for measuring the physician behavior and skill, and the Cronbach alfa value is 0.654 which is reliable because there value is greater than their standard value .60 Which showing the reliability of questions regarding to Physician behavior and Skills in the study of (Saeed et al. (2013).

Table 5: Reliability Statistics

Cronbach's Alpha	Number of items
.618	6

The overhead table no 5 is showing the reliability of fourth depended variable which is patient satisfaction and there were six items (6) for measuring the patient satisfaction, and the Cronbach alfa value is 0.618 which is reliable because there value is greater than their standard value .60 Which showing the reliability of questions regarding to Physician behavior and Skills in the study of (Saeed et al. (2013).

4.2 Correlation

In the correlation among the variable of service quality, access mechanism, physician behavior and skill there is the relation between variables showing

in the table by using correlation test in SPSS.

Table 6 Correlation among Variables

Variables		1	2	3	4
1. Service Quality	--				
2. Access Mechanism	.258**	--			
3. Physician Behavior, Skill	.127*	.284**	--		
4. Patient Satisfaction	.199*	.395**	.482**	--	

** .Correlation is Significant at the 0.01 level (2-tailed).

*.Correlation is significant at the 0.05 level (2-tailed).

The table of correlation between service quality and access mechanism is (.258), it describes that positive relationship exists between service quality and access mechanism. There is positive relationship between service quality and physician behavior and skill because their correlation value is (.127) which is positive. It means both variables behave in a same direction and the value of significance is .047. The value of correlation of service quality with patient satisfaction is .199, it means there is positive relationship between service quality and patient satisfaction, and its significance value is .002.

4.3 Regression

It is a statistical technique for estimation and finding the relationship between depended and independent variables may be one depended with two or more than two independents. So, for this persistence the relationship was created between the service quality and Access Mechanism. It is found that the relation is significant. It was found that the relationship of Access mechanism and Physician behavior is significant. The P-value is considered to seek the significance regression model. And there is a criteria for the P value is value of the P value in regression value is less than 0.05 then the values will be the significant and it is greater than 0.05 than the values will be the insignificant. In regression model the beta value denotes the strength of independent variable arranged dependent (outcome) variable. If beta

value is more or higher then it means that it has good strength and higher influence of predictor (independent) on depended. In current research we can calculate the regression value of our three independent variables which are; Service Quality, Access Mechanism and Physician Behavior and only one dependent variable which is consumer Patient Satisfaction.

Table 7 Regression

Model	Unstandardized Coefficient		Standardized Coefficient	Sig
	B	Std. Error	Beta	
Service Quality	.061	.042	.081	.147
Access Mechanism	.258	.057	.262	.000
Physician Behavior and Skill	.410	.058	.397	.000

In this table there is standardized coefficient we have to look for the relationship of independent variable with depended variable with their significance P-value. The beta value shows the standardized relationships like as the value of service quality with patient satisfaction is .81, which is positive but not significance because their P value is greater than 0.05, and the regress value of Access Mechanism is .262 and significance p-value is .000, which highly significance, it means this hypothesis is accepted and in last the relation value of Physician behavior ,skills with patient satisfaction is .397 and their p value is .000 and this variable relation variable is also positive it and significant.

4.4 Common Method Bias Variance

The common method bias variance is a method which is useful for checking that how much the responded was unengaged while giving their response and which is used for when the unengaged participant gave the improper or not truthful fill up questionnaire data or gave the inaccurate information from data sheet then we used this method for taking the right information. This method given by Harman’s Single Factor also called Harman’s Single Factor method.

Table 8 Total Variance Explained

Factor	Initial Eigenvalues			Extraction Sums of Squared Loadings		
	total	% of variance	cumulate%	total	% of variance	cumulate%
1	4.814	17.831	17.831	3.971	14.708	14.708

Now this data of variance (14.708%) which is less than 50% it means (14.708% < 50%) which is accurate and valid data. It means the ratio of unengaged responded was 14.708, means they’re was not any error related to not seriously filling the questionnaire.

4.5 Hypotheses Testing

The hypotheses which have existed established for the study were measured by the assistance of correlation and regression examination. In the study the role service quality , Access Mechanism and Physician Behavior/Skill and Patient Satisfaction were independent variables and the result of the hypothesis are shown in the table:8 that the hypothesis is accepted or not.

H1: There is positive but insignificant relationship between service quality and Patient Satisfaction as shown in table 7, because the value of P is .147

H2: There is positive and significant relationship between Access Mechanism and Patient Satisfaction as shown in table 7, because the value of P is .000

H3: There is positive and significant relationship between Physician Behavior/skill and Patient Satisfaction as shown in table 7, because the value of P is .000.

Table: 8 summary of hypothesis testing

NO	Hypothesis	Result
H2:	Access mechanism and customer/patient satisfaction.	Supported
H3:	Therapeutic skills and customer/patient satisfaction.	Supported
H1:	Service quality and customer/patient satisfaction.	Not supported

4.6 Discussion and Conclusion

This study was conducted to explore the factor which is affecting in in customers satisfaction in health care services. In this study, we collected the data from Nawabshah.

Q1: How Healthcare service superiority factors effect on patient satisfaction in context of health care in Pakistan?

Q2: Is patient fulfilment mediates the connection between healthcare service quality and patient loyalty?

Q3: Is there any gaps in the value of Healthcare service dimensions?

Q4: How healthcare facility value dimensions (physical setting, customer friendly atmosphere, communication, privacy & care and responsiveness) relay to patient loyalty?

5. Findings

Service quality has positive relationship with patient satisfaction. It was determined that the regression analysis shows the standardized coefficient beta was positive, But not significance. Therefore, service quality and patient satisfaction has direct relationship. Service quality also has positive relationship with physician behaviour, skills. Beta was measured positive in standardized coefficient, Significance in p value. Therefore, this indicates that between service quality and physician behaviour, skills have direct relationship. Service quality increases intellectual ability and satisfaction of Physicians. Physician behaviour, skills has also positive relationship with patient satisfaction. Standardized coefficient beta was positive, significance in p value. This indicates the direct

relationship between physician behaviour, skills and patient satisfaction. Physician care and good behaviour for patient increase loyalty and understanding. Access mechanism has positive relationship with patient satisfaction. According to regression analysis the Significance in p value, standardized coefficient beta was positive. The study indicates direct relationship between access mechanism and patient satisfaction. Treatment form hospital, good communication, facility behaviour and controlling system in access mechanism increases patient satisfaction.

5.1 Research implication

With the increase in population in the world. Many different desires has increased health care issues that put force on research and development sectors in the economy, In order to maintain health and care system. Patient satisfaction totally depends on service quality on which create interest among the Schoolers and researchers to do the best for handling health problems. Almost every sector as well as countries take initiatives for improvement in health sector. They do not only improve it but also they gain a lot of profit from it. Many developed countries get benefit by providing highly useful health care products at the very cheap and affordable costs.

Patient satisfaction on services that a hospital, health care products provider industries makes loyalty among providers and patients. Because customer likes those products which gives him perfect health and better service. Health care sectors keeping focus on improvement that customer want from them they try to understand patient needs and wants. Patient's satisfaction not only depends upon health care product provider companies, but it also largely depends on support from doctors. That support could be emotional, care, respect, listening and knowing the disease process. Patients expectation based on their previous experience and interest that always

measures as higher or lower by getting research from them. Fast service during emergency patient treatment on time creates loyal relationship between patient, doctors, and paramedical staff.

Satisfied customers purchase or use same service more loyally, they do inform others about services that they avail and invite them toward same decision. Market analyst knows the important of customer that is the reason from last 2-decade medical profession has been getting more attention as compare to other sector. Which possibly results clear and agreed understanding form new innovations different types of research and development on disease that can be in the form of new viruses or other in particular.

5.2 Conclusion

In conclusion, the purpose of this study to analyze the factor which is affecting on customer satisfaction we collect the data through different areas of Nawabshah. As the healthcare sector has become one of the most important sectors of the world for the peoples to survive and it is very much important for health care sector to get improved and everyone is supposed to must read and go through with the knowledge needed for the betterment of the healthcare sector. This study's proportions are intended to yield important insights into the variables influencing healthcare satisfaction. Overall health satisfaction, health insurance, and primary care physicians are the three most significant measures of a person's happiness with health care, according to the findings. In order to hold the Pakistani healthcare system accountable for meeting the requirements of its patients, researchers and policymakers must combine the findings of national surveys on healthcare satisfaction generally with the study of satisfaction with particular medical facilities. Knowledge can form a useful information base for understanding. High satisfaction with healthcare has been reported as in previous research on better health status. In

addition, people who went to the doctor's office immediately after falling ill also expressed a high level of satisfaction with their health care. Previous research has shown that medical complications can have a significant effect on patient satisfaction. Future research needs to examine the link between immediate office visits due to medical complications and healthcare satisfaction. All three financial factors, type of insurance, medical cost per family, and annual family income, significantly affected healthcare satisfaction. Health care satisfaction was lowest among non-insurers. According to earlier studies, insurers are more likely to put off necessary medical care, fill out prescriptions, avoid communication with primary care physicians, and spend insufficient time with doctors during visits. It points out that in order to enhance health care coverage for as many sick people as possible, officials must make sure that there are consistent incentives. In this study has identified a number of limitations First, time is shortage for this research and this study totally on health care service so in this virus pandemic time we cannot collect the large data in health care cents so we collect the data all people of city in the Nawabshah .in this study we need to collect the data from heath care centers but the situation of this pandemic is not possible for collect the data in health care centers so we collect the collect through general areas of city and fulfil the questioner. Second, the study used self-reported secondary data, and other healthcare literature has measured satisfaction in a variety of ways, with no clear definition of how to construct it. Thus, our research was restricted to the variables included in the study, and we had no control over the data collection procedure. Third, prior research indicates that irresponsible bias may have a negligible impact on satisfaction studies. We do not believe that reckless prejudice had an impact on this study. Lastly, our study

determines how independent variables directly affect health satisfaction. Future studies could explore more intricate models of healthcare satisfaction using the proposed direct and indirect influence path models.

References

- Achee. (2006). Factors affecting patient satisfaction. *Journal of Basic Applied Science Research*, 3(5)947-952, 2013.
- Boshoff, C., & Gray, B. (2004). The relationships between service quality, customer satisfaction and buying intentions in the private hospital industry. *South African journal of business management*, 35(4), 27-37.
- Donabedian, A. (1966). Evaluating the quality of medical care. *The Milbank memorial fund quarterly*, 44(3), 166-206.
- Campbell, S. M., Roland, M. O., & Buetow, S. A. (2000). Defining quality of care. *Social science & medicine*, 51(11), 1611-1625.
- Fatima, T., Malik, S. A., & Shabbir, A. (2018). Hospital healthcare service quality, patient satisfaction and loyalty: An investigation in context of private healthcare systems. *International journal of quality & Reliability Management*, 35(6), 1195-1214.
- Grigoroudis, E., Manolitzas, P., & Matsatsinis, N. (2014). Using multicriteria decision analysis to evaluate patient satisfaction in a hospital emergency department. *Practice-Driven Research in Emergency Medicine*, 75(2), 312-319.
- Han, H., & Hyun, S. S. (2015). Customer retention in the medical tourism industry: Impact of quality, satisfaction, trust, and price reasonableness. *Tourism management*, 46, 20-29.
- Javed, S. A., & Ilyas, F. (2018). Service quality and

- satisfaction in healthcare sector of Pakistan—the patients' expectations. *International journal of health care quality assurance*, 31(6), 489-501.
- Leonard C. McLean, (2001). Factors Affecting Customer Satisfaction in Health Care Services in Pakistan. *Journal of Basic Applied Science Research*, 3(5)947-952.
- Mittal, B., & Lassar, W. M. (1998). Why do customers switch? The dynamics of satisfaction versus loyalty. *Journal of services marketing*, 12(3), 177-194.
- Naidu, A. (2009). Factors affecting patient satisfaction and healthcare quality. *International journal of health care quality assurance*, 22(4), 366-381.
- Naseer, M., Zahidie, A., & Shaikh, B. T. (2012). Determinants of patient's satisfaction with health care system in Pakistan: a critical review. *Pakistan Journal of Public Health*, 2(2), 52-72.
- Parasuraman, A., Zeithaml, V. A., & BERRY, L. S. (1988). a multiple-item scale for measuring consumer perceptions. *Journal of Service Quality Retailing, spring*, 64, 12-40.
- Parker, R., Ryan, N., & Brown, K. (2000). Drivers and outcomes of the New Public Management in three public sector agencies. *Journal of Contemporary Issues in Business and Government*, 5-14.
- Ryu, S., Ho, S. H., & Han, I. (2003). Knowledge sharing behavior of physicians in hospitals. *Expert Systems with applications*, 25(1), 113-122.
- Saeed, R., Ghafoor, M. O, Sarwar, B., Lodhi, R. N., Arshad, H. M. & Ahmad, M. (2013). Factors affecting customer satisfaction in health care services in Pakistan. *Journal of Basic and Applied Scientific Research*, 3(5), 947-952.
- Shabbir, A., Malik, S. A., & Malik, S. A. (2016). Measuring patients' healthcare service quality perceptions, satisfaction, and loyalty in public and private sector hospitals in Pakistan. *International Journal of Quality & Reliability Management*, 33(5).
- Stavins, R. N. (2006). Vintage-differentiated environmental regulation. *Stan. Envtl. LJ*, 25, 29.
- Spector. (2001). factor affecting customer satisfaction in health care services in pakistan. *Journal of Basic Applied Science Research*, 3(5)947-952.
- Zineldin, M. (2006) The Quality of Health Care and Patient Satisfaction: An Exploratory Investigation of the 5Q Model at Some Egyptian and Jordanian Medical Clinics. *International Journal of Health Care Quality Assurance*, 19(6), 60-92.