



E-ISSN: 2706-8927  
P-ISSN: 2706-8919  
[www.allstudyjournal.com](http://www.allstudyjournal.com)  
IJAAS 2023; 5(9): 16-23  
Received: 06-07-2023  
Accepted: 15-08-2023

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## Perception of patients of quality of care at community health centre, Palin-district Kra Daadi, Arunachal Pradesh

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**DOI:** <https://doi.org/10.33545/27068919.2023.v5.i9a.1046>

### Abstract

Quality in healthcare services is referred to one provided to patients to increase the probability of desired health outcomes and is in accordance to the current professional knowledge (Teleki et al. 2003) to improve patient's satisfaction. Thus good quality of the healthcare service is important for the patients because it enhances the overall health condition of group of population by making continuous efforts to meet their desired quality standards. The Community Health Centre Palin is located at Palin town in Kra Daadi District, Arunachal Pradesh, upgrade itself by greater flexibility in its operation. However the patients and clients visiting community health centre still found the quality of health service poor. The study aimed to understand these patients perception on the quality of healthcare service being provided to them. The finding shows a positive correlation between quality assurance practices and patients perception of quality of care. However there are some lacunae exist, for which recommendation have been presented at the end of study.

**Keywords:** Healthcare services, community health centre, patients

### Introductions

Quality is the most important aspect of service being provided at any health facility. Patient coming from to facility to avail the service of not only expect good treatment but also expect courtesy, good behaviour of all staff, cleanliness of the facility and delivery, prompt and respectful service. Most of the time client's perspective is overlooked. As per National Rural Health Mission (NRHM), which was launched in 2005 to provide equitable and affordable quality health care to every citizen in the country.

The successful implementation of NHM (2012) since its launch is clearly evident by the increase in OPD and IPD, others relevant services being delivered in the public health facilities, but the quality of the service delivered still remains a big issue. Service offered should not judge one way by technical quality but also very important to judge from patient's perception and satisfaction. Environments where the patients are received warmly with dignity along with immediate care are the factor that used for judging quality from the clients perspective.

Quality in health system has two components. The technical quality on which service providers like Doctors, Nurses, paramedical staffs are more concerned and has a bearing on outcome or end result of the service delivered and the service on outcome and quality service pertains to those aspects of facility based care and service which patients are often more concerned and has bearing on patients satisfaction. Operational guidelines for Quality Assurance (QA) have been developed by the Ministry of Health & Family Welfare, Govt. of India in 2013. These guidelines have been prepared with focus on the both technical and perception of services delivered by the by the patients. This would raise satisfaction level of patients seeking service in the public health facility and thus the trust of standard Quality care service would be re-established. The purpose of the guideline is to enable all public health system to provide full range of service which are committed in National Health Programmes (NHP). By ensuring that the services meet up to objective Quality Standards. With Assistance of Quality Assurance Guideline, this study aimed at studying the existing standard of Quality care and recommendation to improve the service delivery to the patients attended in OPD/IPD at community health centre Palin, Arunachal Pradesh.

### Problem Statement

The launch of National Rural Health Mission (NRHM) in year 2005 was noteworthy event for the COMMUNITY HEALTH CENTRE PALIN, because the aim of NRHM was to provide equitable and affordable health care facility to people. Thus CHC Palin participated in this project through infrastructural expansion, enhancement in skilled human resources and adoption of the greater flexibility in its operation. However the patients CHC Palin still found quality of the health service to be poor. The quality in health care service can be defined as degree to which health service provided to patients increase the probability of desired health outcome and are in accordance to the current professional knowledge, thus good quality of the health care service is important for the patients because it enhances the overall health condition of the group of the population by making continuous efforts to meet their desired quality standards, when patients identify quality of the healthcare as highly satisfying, they feel safe, develop trust on the effectiveness of the treatments and find it tailored as per their health condition. Patients also understand that good quality healthcare service is equitable and gives them best value for their money spent.

In spite of progressing the infrastructure and introduction of Quality Assurance Monitoring Team by NRHM, Community Health Centre Palin still lags behind in meeting the specific quality standards of healthcare service expected by patients, it is in context of significance of the quality health care system the researcher intends to explore the reception of the patients regarding the quality of services they received. Hence, an indebt exploration taking the perspective of the inpatients of the hospital will bring forth the actual scenario and hence, will contribute in enhancing the otherwise limited sphere.

### Rationale for study

Quality in health care is classified into two components, one is the technical – quality on which the service providers are more concerned, the other is service quality which is concerned with facility based services and care provided to the service seekers. Services offered should not only judge from the point of technical – quality, but also very importantly the users perception must also be taken care of because most of the time it's often overlooked. Perception of the poor quality service delivery will discourage the patients from availing the health care services provided by the government.

On the contrary the parameters that determine the patients' perception about quality are different. thus research is significant because its purpose is to understand how patients how patient s perception toward quality of health care provided by service provider, so that recommendation can be made for meeting their expectation there by upgrading the quality standards in the hospitals.

In spite of the making infrastructural and work force up gradation at community health centre of the Palin, but also there is gap between quality of service offered by the hospital. This study focus on how the community health centres Palin is trying to maintain up to mark as per the operational guidelines of the on Quality Assurance both on technical and perception of service delivery.

### Research Questions

1. Q. To what extend has the quality Assurance Guideline

and other policies related activities has been implemented and followed by Community health centre Palin influenced patients satisfaction Level ?

2. Q. How has the quality health care service of the Hospital influenced the level of its patient's satisfaction?

### Literature Review

Quality in health care system refers to the procedure of consistently executing the most customized to right patients at the right time, as per according to Clancy 2009. The three dimensions that determine quality in healthcare are structure, process and outcome. Structure refers to the behavioural characteristics, skill set and level of education of health care professional connected with the industry; process refers to system of executing various health care related operations in an accurate and methodological manner. The third dimension, outcome refers to the end of result of the type of care offered to patients. Research was conducted by Steinwachs and Hughes (2008) on quality parameters in health care. Provision of quality care service should cater to aspect such as, safety measures, effectiveness of treatment, patients care centred, efficiency, timeliness of delivery.

The elements of the quality comprises of two components – Technical and service. One of the essential elements of the health care industry is its technical infrastructure, which deals with service providers or the staff such as Doctors, nurses and Para medical workforce. Actually information gathering and information exchange are cardinal parts of effective care delivery across the entire level of the healthcare system. integration of the critical information needs training of the workforce and development of the technical infrastructure for information management and implementation of communication tools. the major types of the clinical information that are sought in healthcare are health record of the various patients rapidly changing medical evidence and providers orders that guide the process of patients care. where the technical infrastructure of the hospital assure the patients that latest and most sophisticated treatment facilities are available to them, Preventive as well as curative service are also rendered by Doctors and nurses at the hospitals as per need of the diseased situation of the perspective patients. Among the essential healthcare services rendered by hospitals include offering prompt health care service to the patient by means of maternal health and child health service, antenatal care and promotion of health education among patients and their families, polite behaviour of the workforce.

### Guidlines on quality standards

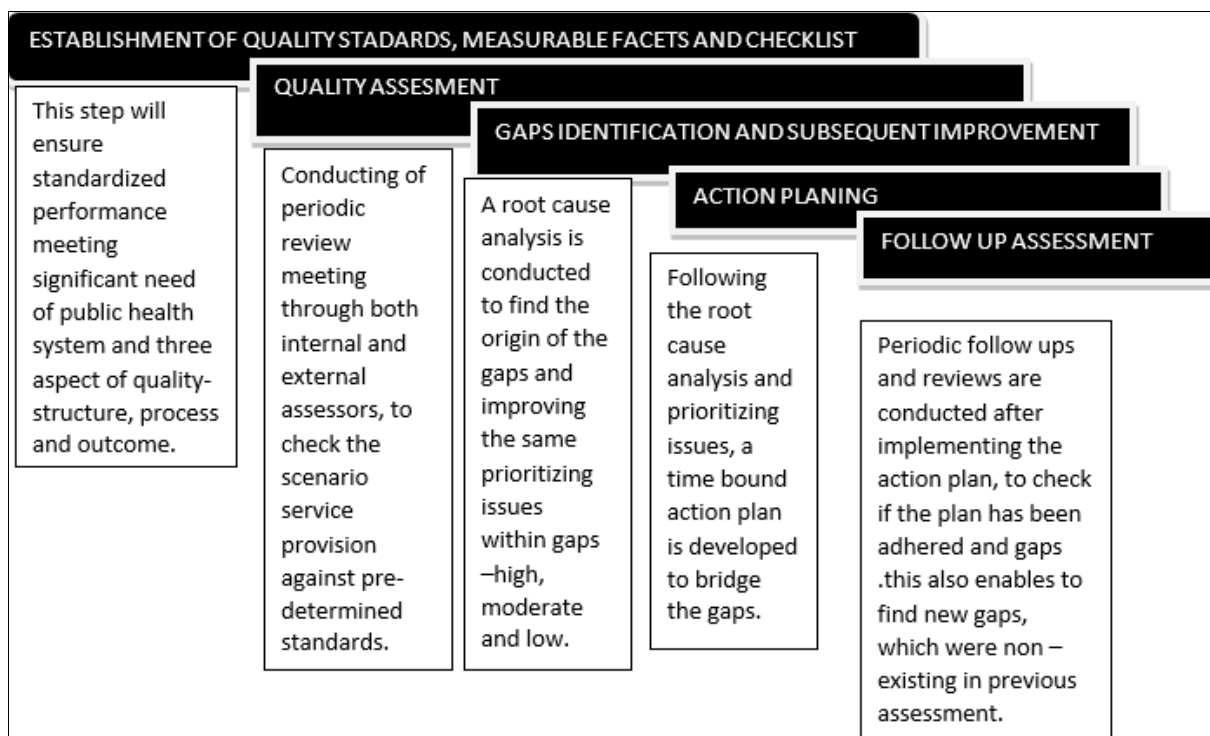
The guidelines and various acts have been passed by the government of the India in quality standards in health care sector in order to improve the quality standards in health sector in order to improve the quality of the health and wellbeing of the entire population. The Govt. Hospital infrastructure facilities and equipment's such as safe for are public usage and hospital meant for providing primary healthcare must have minimum essential infrastructure and type of human resources that are essential for it. Certain acts and laws are passed by the India government from time to time in order to ensure that hospital follows certain legalities and procedures. For instance, such laws give confirmation. that hospital must abide by the legalized process of

registration.

**Operational Guideline for Quality Assurance by MOHFW (2013)**

The Ministry of Health and Family Welfare, Government of India launched the National Health Mission in year 2005, to strengthen the infrastructure condition of the country, public healthcare system with making the facilities equally accessible and affordable to its citizens, However, despite of monitoring the growth and expansion in the physical infrastructure skilled human resources, operational flexibility and allocation of the sufficient budget and its managements, quality of service delivered requires improvement. And in such scenario Quality Assurance Guideline Developed in 2013 by MoHFW in identifying the gaps existing in delivery of the service, followed by tracing its roots and connecting them to organized processes. Operational guideline has been considered as checklist formulated by MoHFW that help hospitals in tracking

quality specified standards for maintaining quality in health care service by hospitals within each individuals state. The Quality Assurance Guideline thus developed are based on Donabedian Model, classifying the concerned elements into three major aspects – structure, process and outcome. While the structure aspect highlights areas infrastructure, drugs and equipment, availability and adequacy of skilled human resources, processes refers to procedure within provision of these quality services like, promptness of the registration, behaviour of the staff, maintenance of privacy and confidentiality. Outcome aspect measures the end result of structural and procedural implementation within quality care. These guideline are very convenient to use because they help in checking the quality standard independently in each patients, focusing on the system and processes, utilizing data for analysing process of improvement, those are undertaken in four major components in turn depends on certain crucial steps of implementation –



Source: Ministry of health and family welfare (2013, p, 11)

Fig 1: Steps formulated by Quality Assurance Guideline

The report of the Maternal Health Division (2013) affirms this by suggesting that guideline serve as roadmaps for implementing quality in health care services. Therefore, it is essential for the healthcare service centre throughout India to meet the minimum standards defined in this guideline. if these standards are met meticulously the quality of the care service throughout India will automatically go up.

**Key Variables**

From the above empirical investigation of the element literature and exploration of guideline laid down by both union Ministry of Health & Family welfare and United Nation through National Rural Health Mission (NRHM) and

Millennium Development Goals (MDG), Respectively, it is evident that effective healthcare practices following the above guidelines leads to quality of care. Hence the variable to tested study is:

**Quality assurance practices:** This variables will include various practices followed by the case hospital staff, based on Donabedian measures of structure, process and outcome developed by NRHM and MDG, further those practices have been assessed through the patients perception, so as to understand the degree of the quality of care implemented in the Community Health centre, Palin.

**Table 1:** Representation of Dependent & Independent variables.

Dependent variable	Independent variables
Customer Perception	Quality assurance practices: Patients satisfaction Technical quality Interpersonal manner Communication Financial Aspects Time spent with Doctors Accessibility and convenience

Literature review has presented various secondary data related to quality of the healthcare service in hospital. Discussion has been made on the implication of the quality care, types of the services provided by CHC, in this chapter presented graphical conceptual model, key variables, proposed model and hypothesis are also given and their implication also necessity brief discussion has also been made on various acts and guidelines passed by Government of India for adhering to quality measures in healthcare services.

**Aim and Objectives:** The study aim to understand the perceptions of patients experience of IPD/OPD at Community Health Centre (CHC) Palin.

**Objectives**

1. To understand the concept of the quality within health care system and explore the various guidelines and passed by Government.
2. Find out the gaps and challenges in the process of providing quality health care services.
3. To find and suggest recommendation appropriate for improving the quality of the health care

**Methodology**

**Study design**

A cross sectional study with primary data collection was conducted. A questionnaire was administered by the investigator to learn the perspective of Out – Door Patients / Indoor Patients. A mixed type of the study involving both qualitative and quantitative was conducted.

**Sampling and sample size**

Since the study’s aim was to understand patients perception about quality healthcare services being received by them within the health care system of Palin Township in Arunachal Pradesh, the study sample was purposively selected from outdoor and indoor patients based on availability. As per HMIS Report 2016 – 18 was mentions that patients Load of per month of CHC Palin is 200-250 per month. 10 indoor patients and 70 outdoor patients sample was collected n= 80. The sampled population was considered as a guide in understanding the healthcare practices carried out by the staff of the case hospital, to deliver standardized quality of the care.

**Data collection and analysis**

Survey strategy was implemented through administration of semi- structured questionnaire comprising of the both open – ended and close – ended questionnaires. The questionnaire was conducted after acquiring necessary permission from

respective department and informed consent of the patients, explaining them behind the study and utilization of their views. For this a participant information sheet and consent form were circulated along with survey questionnaire. Data analysis and interpretation forms a significant part of a research study, as it becomes the only medium of the answering the research question, thereby achieving the objectives. In this study a mixed approach is applied.

**Study setting and duration**

This study was carried about at Community Health Centre Palin, Kra Daadi District of Arunachal Pradesh. Primary Data was collected from Out –Door Patients/Indoor – Patients

This study was carried out for two month from May 2018 to June 2018.

**Validity & reliability of data**

According to Cresswell (2013) [4] Data validation is made by means of processes like peer review, thick and thin description, external auditing, clarification of neutrality of the researcher, refinement of the theories in term of inquiry advances, interpretation and observation. Hence while validity has been established through pilot testing and making necessary modification based on the lacunae identified.

**Ethical considerations**

The Institutional Ethical Committee at IIPH-Delhi granted approval for study in April 2018. Prior to the commencement of the study appropriate official permission was taken from the District Medical Officer (DMO) Kra Daadi District and Medical Officer In-charge of CHC Palin. Taking care of the ethical issues patients was explained regarding the research in detail with prior explanation with informed Consent Form and participant’s information sheet. The participants who weren’t willing participate were not forced. All the Details and identity were kept confidential.

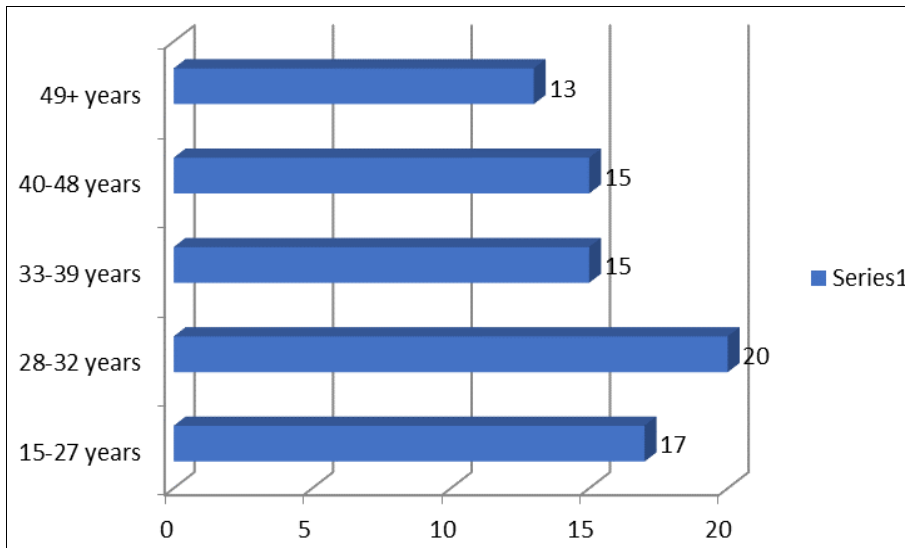
**Results and Discussion**

Analysis of collected primary and secondary data has been done for the purpose of the highlighting the research question and finding their relevant answers. Thus both descriptive and inferential analysis has been conducted.

**Demographic profile of study participants**

The majority of the respondents were female, from low socio economic background, which were not able to obtain private health facilities. Females were 49 and males were 31 out of n = 80 respondents.

**Distribution of respondents Age Group wise**

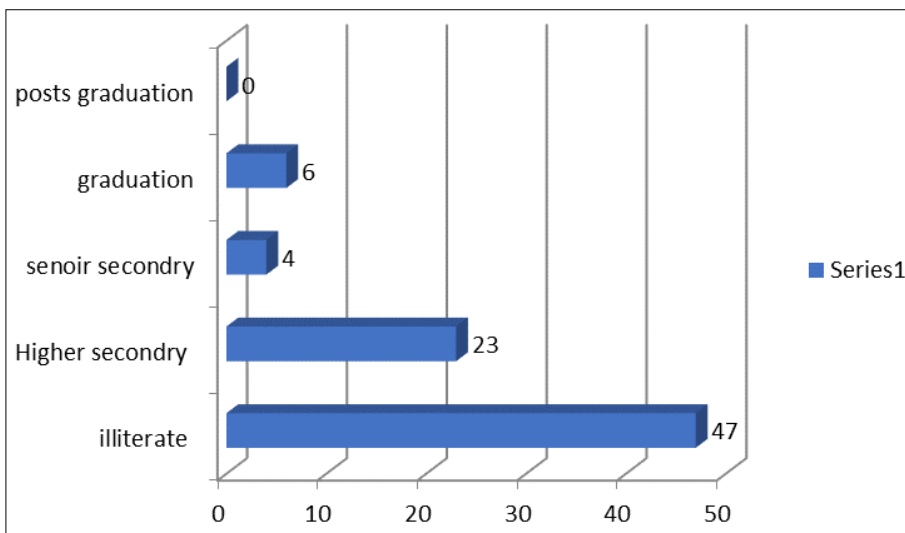


**Fig 2:** Shows the age group distribution of respondents at CHC Palin

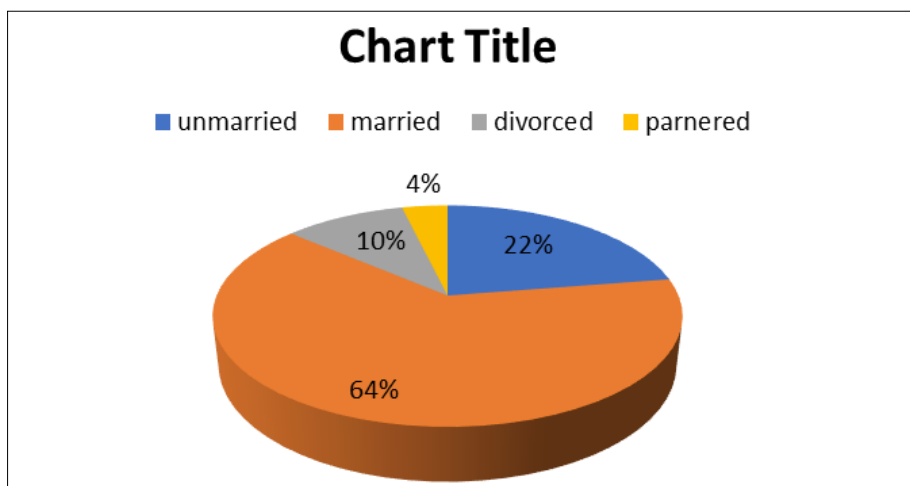
The above Figure 2 shows the age group distribution of respondents at CHC Palin. Most of the respondents were of

the age group 28 -32 years, which is of 25% and lowest is from age group of 49 + years i.e. of 16.25 %.

**Representation of education qualification**

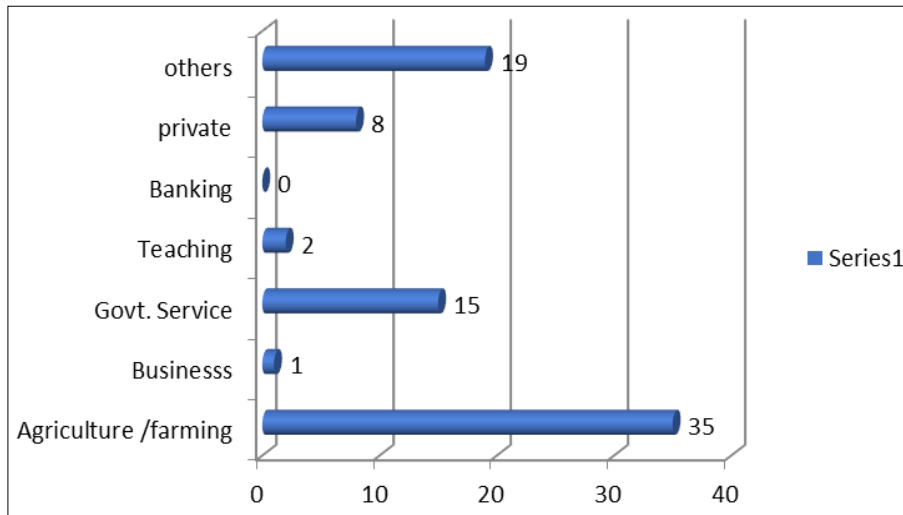


**Fig 3:** Shows distribution of education qualification. Majority of people interviewed were illiterate nearly 58%.



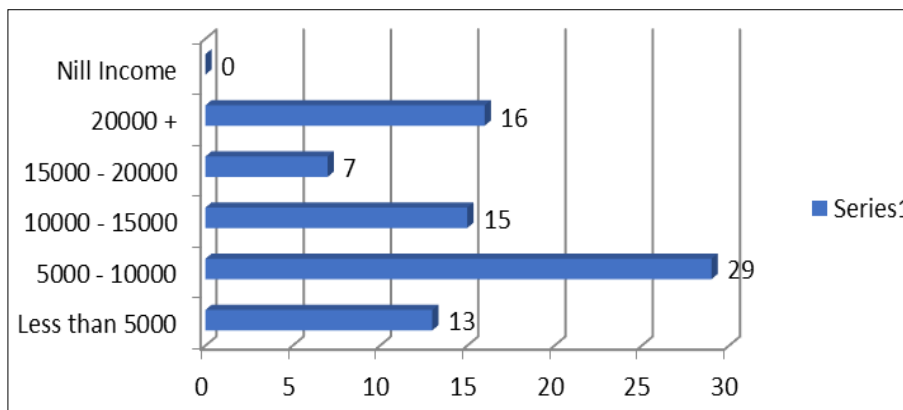
**Fig 4:** Marital Status- majority of the respondents were married i.e. 64%

**Representation of distribution of occupation of respondents**



**Fig 5:** Occupation distribution of respondents. About 43.75% respondents were from agriculture sector

**Representation of distribution monthly household income**



**Fig 6:** Majority of respondents were from the income group of Rs 5000 – 10000 per month.

**Table 2:** Representation of patients satisfaction with regard to quality of healthcare services

S. No	ITEMS	S. Agree N	Agree N	Uncertain N	Disagree N	S. Disagree N
1	Doctors are good about, explaining the Reason for medical tests.....	3	52	12	13	0
2	I Think my doctors office has everything Needed to provide complete medical care. ....	2	31	21	25	1
3	The medical care, I have been receiving is just about perfect...	5	36	30	8	1
4	Sometime doctors make me wonder, if their diagnosis is correct. ..	0	19	23	37	1
5	I feel confident that I can get the medical care, I need Without being set back financially. .	1	24	14	40	1
6	When I go for medical care they are careful to check everything, when treating and examining me...	2	48	13	14	2
7	I have to pay for more of my medical care than I can afford. ...	1	47	12	20	0
8	I have easy access to the medical specialist I need. ....	1	34	33	12	0
9	Where I get medical care, people have to wait too long for emergency treatment. ....	0	5	5	68	2
10	Doctors act too business-like and impersonal toward me. ....	2	15	22	34	7
11	My doctors treat me, in a very friendly and courteous manner. ....	1	50	13	16	0
12	Those who provide my medical care sometime hurry too much when they treat me. ....	0	21	21	37	1
13	Doctors sometimes ignore what I tell them.....	2	21	18	39	0
14	I have some doubts about the ability of the doctors who treat me. ....	3	13	28	36	0
15	Doctors usually spend plenty of the time with me. ....	1	48	13	18	0
16	I find it hard to get an appointment for medical care right away. ...	2	11	4	59	2
17	I am Dissatisfied with some things about the medical care I receive. ....	0	20	15	41	4
18	I am able to get medical care whenever I need it. ....	1	57	11	11	0

**Table 3:** Patients Satisfaction Score based on seven components

Scale	Minimum & Maximum Score	Mean (SD)	Satisfaction level %
General satisfaction	3 - 10	6.81 (1.47)	0.62 (strongly Disagree) 17.5 (Disagree) 28.12 (Uncertain) 48.12 (Agree) 5.62 (Strongly Agree)
Technical quality	7 - 17	12 (2.56)	1.87 (strongly Disagree) 22.18 (disagree) 26.56 (Uncertain) 47.5 (Agree) 1.56 (Strongly Agree)
Interpersonal Manner	4 - 9	6.81 (1.51)	1.25 (strongly Disagree) 19.37 (disagree) 28.12 (Uncertain) 52.5 (Agree) 5 (Strongly Agree)
Communication	3 - 9	6.73 (1.43)	1.25 (strongly Disagree) 21.25 (disagree) 18.75 (Uncertain) 56.87 (Agree) 1.87 (Strongly Agree)
Financial Aspects	3 - 8	5.43 (1.68)	1.25 (strongly Disagree) 54.37 (disagree) 16.25 (Uncertain) 27.5 (Agree) 0.62 (Strongly Agree)
Time Spent with Doctors	3 - 8	6.58 (1.53)	0 (strongly Disagree) 24.37 (disagree) 21.25 (Uncertain) 53.12 (Agree) 1.25 (Strongly Agree)
Accessibility and Convenience	8 - 17	14.26 (2.04)	0 (strongly Disagree) 12.18 (Disagree) 16.56 (Uncertain) 68.12 (Agree) 1.87 (Strongly Agree)

The study was conducted to assess patients satisfaction level at CHC Palin. Regarding quality of the treatment, behaviour of medical staffs toward the patients, behaviour of doctors and nursing staffs, quality of facilities of hospital, and availability and accessibility of medical facilities.

General satisfaction level of patients found to be good. Respondents reported that courteous manner and carefully listing complaints. Patients choose hospitals based on its performance the hospital and availability of the specialist service. It was also observed in the study that though the patients consider the prices of hospital to be high, they are more concerned about good treatment and quality services and they are inclined to recommend the hospitals to their friends and relatives.

Today market has become customer driven and health care market is no exception. Patients are better informed and they know more about health care as compare to earlier. So CHC Palin in respect of the General Satisfaction who agree were 53.74% and disagree 24.05%, Technical Quality agree were 53.74% and disagree 18.12%, Interpersonal Manner Agree were 57.5% and disagree 20.62%, Communication skill agree were 58.74% and disagree 22.50%, Financial back aspect from patients side Agree 28.12% and Disagree 55.62%, Time spent with Doctors to patients agree 54.37% and disagree 24.37% and Accessibility & convenience agree were 69.99% and disagree were 12.18%. Over result found to be mostly around Good services but not under very good or excellent. Focused intervention on improvement quality of service delivery, improvement of technical quality of

staffs like doctors and nurses. Also improvement in accessibility of medical facilities like availability medicine and laboratory within Hospital of CHC Palin of Kra Daadi Distt. Arunachal Pradesh Need to be improved, so that the level of patients satisfaction may further improve to very good category.

**Conclusions & Recommendations**

Patients rated their perceptions of quality of healthcare on scales such as General satisfaction, Technical Quality, Interpersonal manner, Communication skill, Financial back Aspects, Time spent with doctors and Accessibility & convenience of patients. Overall the patients satisfaction levels were found to be good, but not excellent. Need more improvements in the healthcare services. There is need for a steady supply medicine, with improvements of cleanliness both in the ward and toilets, appropriate hospital infrastructure like lighting and fan, comfortable and adequate supply of medicine and hygiene drinking water. Simultaneously need improvement in technical skill of Doctors and Nurses so that the level of patients satisfaction may further improve to very good category.

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