

**Access the Quality Service of Ganeshman Singh Memorial Hospital  
and Research Center**

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Received: November 14, 2020; Revised & Accepted: December 14, 2020; Published: January 10, 2021

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**Abstract**

*The aim of this paper is to assess the quality of services in the Ganeshman Singh Memorial Hospital and Research Center, Lalitpur, Nepal, considering that the quality is a key parameter in performance evaluation. Patients are the main actors in evaluating and judging the quality, therefore this study is based on a questionnaire completed by 53 patients and visitors between January and February, 2020. The results show that services by the paramedical staff (OPD nurses) have the highest mean value (mean = 4.17) which is closed to the excellent performance of hospital whereas the lowest mean was 3.57 rated for the cleanliness of the hospital, including the reception area, OPD and surrounding area. Though, in average (mean = 3.77), facilities of Hospital were rated as 'Good' in total. Similarly, the cost of medicine was slightly expensive in comparison of other cost like consultation fee, cost of diagnosis and lab test and registration. The patients had rated the cost of hospital in totality*

*as 'Good' status, which indicates that the total cost of treatment was affordable for the patient. With the necessary inputs from the patients and the attendants by pointing various drawbacks or deficiencies should always be taken care of by the hospital administration that will turn into a good result of improvement in the hospital services to the satisfaction of the patients.*

**Keywords:** Hospital services, Patient satisfaction, Quality care

## **Introduction**

Health care quality is not merely a local issue; it is a global issue. The health care industry is undergoing a rapid transformation to meet the ever-increasing needs and demands of its patient population. Hospitals are shifting from viewing patients as uneducated and with little health care choice, to recognizing that the educated consumer has many services demands and health care choices available. Respect for patient's needs and wishes, is central to any humane health care system (Qadri, et al., 2012).

Quality of health services was traditionally based on professional practice standards, however over the last decade; patient's perception about healthcare has been predominantly accepted as an important indicator for measuring quality of health care and a critical component of performance improvement and clinical effectiveness. Patient satisfaction has been defined as the degree of congruency between a patient's expectations of ideal care and his /her perception of the real care (s) he receives (Qadri, et al., 2012) (Aragon SJ, 2003). It is a multidimensional aspect, represents a vital key marker for the quality of health care delivery and this is an internationally accepted factor which needs to be studied repeatedly for smooth functioning of the health care systems. It has been an important issue for health care managers (Andaleeb, 2000).

The client here does not technically assess their own health status after receiving care but the degree of satisfaction with the services delivered. Various dimensions of patient satisfaction have been identified, ranging from admission to discharge services, as well as from medical care to interpersonal communication (Kalaja, Myshketa, & Scalera, 2016). Well recognized criteria include responsiveness, communication, attitude, clinical skill, comforting skill, amenities, food services, etc. It has also been reported that the interpersonal and technical skills of health care provider are two unique dimensions involved in patient assessment of hospital care (Thi, Briançon, Empereur, & Guillemin, 2002) (Cheng, Yang, & Chiang, 2003).

Better appreciation of the factors pertaining to client satisfaction would result in implementation of custom-made programs according to the requirements of the patients, as perceived by patients and service providers (Baba, 2004). Following increased levels of competition and the emphasis on consumerism, patient satisfaction has become an important measurement for monitoring health care performance of health plans. Patient is the best judge

since (s) he accurately assesses and provides inputs which can help in the overall improvement of quality health care provision through the rectification of the system weaknesses by the concerned authorities (Ladhari, 2009). Many previous studies have developed and applied patient satisfaction as a quality improvement tool for health care providers. Thus, patient satisfaction is an important issue both for evaluation and improvement of healthcare services (Zarei, Arab, Froushani, Rashidian, & Tabatabaei, 2012). Keeping this in view, the present study was conducted to assess patient and visitor satisfaction with services provided in Ganeshman Singh Memorial Hospital and Research Center, Lalitpur, Nepal.

### **Objective of the study**

The general objective of this study is to access the quality service of Ganeshman Singh Memorial Hospital and Research Center.

The specific objectives are:

1. To identify the demographic distribution of visitors and patients of Ganeshman Singh Memorial Hospital and Research Center.
2. To identify the availability of facilities and the convenience of the hospital.
3. To explore the affordability of hospital cost from the perspective of patients.

### **Material & Method**

The study was based on quantitative design. It was a cross-sectional study. The data was collected by using the structured survey questionnaire. The study team visited Ganeshman Singh Memorial Hospital and Research Center and met with the visitors and patients to collect the data. Simple random sampling technique was used to select the respondents. The collected data was re-checked to clean the non-response and error response. After cleaning the data, it was analyzed from the statistical software (SPSS 20v.) and data are presented in the tabular and graphical form. Frequency and mean value are used to analyze the data.

### **Findings and Discussion**

The study was conducted among the visitors of Ganeshman Singh Memorial Hospital & Research Center. The study focused on the distribution of demographic information of visitors, facilities available in the hospital and expenses of hospital. The data presented under the different segment are as follows:

### **Demographic Information of Respondents**

The study had asked the demographic information of visitors, like gender, caste, marital status, education and age. The data presented in Table 1 show that majority of respondents were Male (52.8%) and (47.2%) were Female. Whereas in total 53 respondents, 28 were Male and remaining Female.

*Table 1: Demographic Information of Respondents*

|                               |                            | Frequency | Percent |         |                |
|-------------------------------|----------------------------|-----------|---------|---------|----------------|
| <b>Gender</b>                 | Female                     | 25        | 47.2    |         |                |
|                               | Male                       | 28        | 52.8    |         |                |
|                               | Total                      | 53        | 100.0   |         |                |
| <b>Caste</b>                  | Brahman                    | 14        | 26.4    |         |                |
|                               | Chhetri                    | 14        | 26.4    |         |                |
|                               | Janajati                   | 21        | 39.6    |         |                |
|                               | Dalit                      | 2         | 3.8     |         |                |
|                               | Other                      | 2         | 3.8     |         |                |
|                               | Total                      | 53        | 100.0   |         |                |
| <b>Marital status</b>         | Married                    | 33        | 62.3    |         |                |
|                               | Unmarried                  | 20        | 37.7    |         |                |
|                               | Total                      | 53        | 100.0   |         |                |
| <b>Education</b>              | Illiterate                 | 4         | 7.5     |         |                |
|                               | Illiterate (below 8 class) | 12        | 22.6    |         |                |
|                               | 9 to 10 and SLC            | 22        | 41.5    |         |                |
|                               | 12                         | 2         | 3.8     |         |                |
|                               | Bachelor                   | 13        | 24.5    |         |                |
|                               | Total                      | 53        | 100.0   |         |                |
| <b>Descriptive Statistics</b> |                            |           |         |         |                |
|                               | N                          | Minimum   | Maximum | Mean    | Std. Deviation |
| Age of respondents            | 53                         | 15.00     | 79.00   | 35.9623 | 14.08349       |

**Source:** Field Survey, 2020

The study had collected the caste distribution of visitors so the above Table 1 shows, in total 14 (26.4%) respondents belong to Brahmin cast group, same as 14 (26.4%) respondents belong to Chhetri cast group, similarly 21(39.6%) respondents belong to Janajati, 2(3.8%) respondents belong to Dalit cast group, remain 2(3.8%) belong to other caste like Madhesi and Muslim. Thus, this study shows that highest number of Janajati visited the hospital whereas Dalit and another cast group were very low.

In case of marital status, the data show that 33(62.3%) respondents were married whereas 20(37.7%) respondents reported they were unmarried. Likewise, the study also explored the education level of hospital visitors. Out of 53 respondents, 4(7.5%) were illiterate, 12(22.6%) respondents had completed 8 class, 22(41.5) respondents had completed up to 10 class,

similarly 2(3.8%) respondents were reported they study up to 12 class and 13(24.5%) respondents had completed bachelor level.

This study found that the age of visitors and patients of Ganeshman Singh Memorial Hospital & Research Center were minimum 15 years to maximum 79 year. The average age of respondents was 35.96 years.

### Visit of this hospital

Researchers asked respondents regarding hospital visiting for checkup. The results from the given table show that most of the respondents 19(35.8%) visit for two time, 18(43%) respondents visit one time and 16(30.2%) respondents visit three or more times.

*Table 2: Visit of this hospital*

| Checkup time |                  |           |         |
|--------------|------------------|-----------|---------|
|              |                  | Frequency | Percent |
| Valid        | One time         | 18        | 34.0    |
|              | Two time         | 19        | 35.8    |
|              | 3 and more times | 16        | 30.2    |
|              | Total            | 53        | 100.0   |

Source: Field Survey, 2020

### Facilities and Conveniences of Hospital

One of the main objectives of this study was to identify the facilities available in hospital and conveniences to access the services of hospital. The study team discussed with visitors and patients of Ganeshman Singh Memorial Hospital and Research Center. Respondents were asked the convenience of the hospital location (consider travel time, access by public transportation and parking). Out of 53 respondents, the highest 23(43.4%) respondents stated that the hospital location was fair, followed by 17(32.1%) stated good, 11(20.8%) stated excellent whereas less number 2(3.8%) respondents stated that the convenience of hospital location was poor. From data it is confirmed that hospital location was quite convenience.

Respondents were also asked the accessibility of the hospital (Is the hospital easy to find, are stairs or elevators readily available, is handicapped entrance adequate, etc.). Out of 53 in total, the highest 24(45.3%) respondents responded that hospital accessibility was fair, 22(41.5%) respondents stated that hospital accessibility was good, 6(11.3%) respondents responded that hospital accessibility was excellent whereas less number 1(1.9%) stated that hospital accessibility was poor.

*Table 3: Facilities and conveniences of Hospital*

| SN  | Questions   | Poor | Fair | Good | Excellent | Total |
|-----|---|------|------|------|-----------|-------|
| 1.  | The convenience of the hospital location (Consider travel time, access by public transportation, and parking.)                                      | 3.8  | 43.4 | 32.1 | 20.8      | 100.0 |
| 2.  | The accessibility of the hospital (Is the hospital easy to find, are stairs or elevators readily available, is handicapped entrance adequate, etc.) | 1.9  | 45.3 | 41.5 | 11.3      | 100.0 |
| 3.  | The comfort to get admission/registration/ticket  | -    | 37.7 | 34.0 | 28.3      | 100.0 |
| 4.  | The attractiveness of the reception area.   |      | 41.5 | 39.6 | 18.9      | 100.0 |
| 5.  | Seating arrangement in OPD  | 3.8  | 32.1 | 39.6 | 24.5      | 100.0 |
| 6.  | The cleanliness of the hospital, including the reception area, OPD and surrounding area   | 13.2 | 34.0 | 35.8 | 17.0      | 100.0 |
| 7.  | Services by the paramedical staff (OPD nurses).   | 1.9  | 20.8 | 35.8 | 41.5      | 100.0 |
| 8.  | Availability of Doctor in OPD as your health problem.   | 5.7  | 34.0 | 41.5 | 18.9      | 100.0 |
| 9.  | The amount of time spent with physician/doctor.   | 5.7  | 39.6 | 39.6 | 15.1      | 100.0 |
| 10. | The communication with your physician/doctor.   | 5.7  | 34.0 | 37.7 | 22.6      | 100.0 |
| 11. | Explanation about the disease to the patient  | -    | 41.5 | 34.0 | 24.5      | 100.0 |
| 12. | Belief in cure of disease from prescription of doctor.  | 1.9  | 32.1 | 45.3 | 20.8      | 100.0 |
| 13. | Reliability of Lab Report.  | 3.8  | 35.8 | 47.2 | 13.2      | 100.0 |

**Source:** Field Survey, 2020

The study team asked to visitors of Hospital about the easiness to get admission/registration/ticket for health check-up. The results show that maximum respondents 20(37.7%) reported fair followed by 18(34%) reported good and 15(28.3%) reported excellent regarding the easiness to get admission/registration/ticket. From this study, it is known that majority of visitors felt need of some improvement in the ticketing system which might reduce the waiting time for visitors and patients.

Similarly, the hospital visitors and patients were asked about the attractiveness of the reception area because it is the first impression area for visitors. The health check-up journey of patient starts from the reception desk so it should be attractive and more informative. The data shows that maximum respondents 22(41.5%) stated it was fair followed by 21(39.6%) respondents responded on good and rest (18.9%) felt excellent. It was good to explain here that nobody reported the poor attraction of reception area though response of majority visitors indicates the need of improvement in reception area. The hospital should well-maintained the sanitation of reception areas as well as comfortable seating arrangement in front of reception desk so that

visitors should feel comfortable to wait their number for registration. Besides that, the receptionist should have adequate information of hospital facilities and availability doctors and their time so that they can convey the clear message to visitors and patients.

The other aspect of discussion was seating arrangement in OPD for visitors and patient. It is true that people visit the health facilities when they have some kinds of health problem. In such time, they become weak and immune system become weak; they need physically and psychologically comfort place. So, hospital should manage comfortable seating arrangement in OPD so that patients can easily wait for Doctor's time. In this discussion, maximum respondents 21(39.6%) reported that there was good seating arrangement in OPD followed by 17(32.1%) reported fair and 13(24.5%) reported excellent. Whereas, minimum 2(3.8%) visitors and patients felt it was poor. In the study, majority had positive comments though the hospital should take-care of each individual patient's need and suggestion so hospital should think for the better improvement of seating arrangement in OPD.

During the time of questionnaires survey, respondents were asked about the cleanliness of the hospital, including the reception area, OPD and surrounding area. It shows that maximum respondents 19(35.8%) reported that it was good followed by 18(34%) reported fair, 9(17%) reported excellent regarding the cleanliness of the hospital, including the reception area, OPD and surrounding area. Whereas, some 7(13.2%) of the visitors reported that the sanitation of hospital premises was poor. In total, it is known that majority of the visitors responded the positive answer on cleanliness of the hospital areas. Though, hospital should listen the feedback of minority groups also so hospital should maintain the cleanliness of hospital premises to address the response of 13.2% visitors.

Next discussion issue of this study was services provided by the paramedical staff (OPD nurses). Table 3 shows that there was maximum percentage of respondents 22(41.5%) reported excellent about the service of paramedical staffs followed by 19(35.8%) reported good, and 11(20.8%), reported fair. Apart from this, few respondent 1(1.9%) shared their experience that the service of paramedical staffs was poor. On aggregate, more than 77% of respondents replied that services by the hospital paramedical staff (OPD nurses) was good.

Each patient expects the relevant doctor for their health check-up and treatment. Availability of disease specific Doctor is one of the main attractions of hospital. The expertise of Doctors increases the efficiency and performance of hospital than the physical attraction of hospital. In this context maximum percentage of respondents 22(41.5%) rated good position of hospital to avail the disease specific doctors followed by 18(34%) rated fair status, and 10(18.9%) rated excellent service to avail the Doctor in OPD as the need of patient. Apart from this, few 3(5.7%) patients rated the poor status of hospital to provide the disease specific doctor. The study indicates the need of some improvement to avail the disease specific doctor in hospital which might contribute in the improvement of performance of hospital.



Similarly, the study collected the data from the respondents by asking the question that the amount of time spent with physician/doctor during the health check-up. The data presented in Table 3 shows that there was maximum 21(39.6%) number of respondents reported that the time given by doctor for health check-up and discussion with patient was good followed by 21(39.6%) reported fair, and 8(15.1%), reported excellent. Apart from this, some of the patients 3(5.7%) found unsatisfied with the time provided by doctor because they responded poor service for Doctor's time. On aggregate, majority of patients given positive response on the time spent by the physician/doctor for health check-up.

The study collected the data from the respondents by asking the question about the services quality provided by the paramedical staff (OPD nurses). The data shows that there was maximum 22(41.5%) numbers of respondents reported that the service was excellent followed by 19(35.8%) reported good, and 11(20.8%) reported fair quality service of paramedical staffs. Apart from this, few 1(1.9%) respondent was not happy with the service quality so they rated the poor quality for service of paramedical staffs. In total, majority of patients were satisfied with services quality provided by the hospital paramedical staff (OPD nurses).

In relation to the hospital facilities, the study team also discussed with the patients and visitors by asking the question about clarity on explanation of the disease and health problem to the patient. Doctors should clearly provide the detail information of disease types; its prevalence and severity of health problem to the patients and patients' party. Most of causes of conflict between patient's party and hospital lies behind the unclarity about the severity of health problem of patient. In this case, the finding shows that there was maximum 22(41.5%) number of respondents reported that the practice of explaining of disease and severity of patient's health condition was fair followed by 18(34%) reported good, and 13(24.5%) reported excellent.

Doctor not only treat physically but also treat psychologically for the patients. If doctors convince the patients about the successful treatment of his or her health problem then patients become optimistic and his or her confidence level also increase. In such condition, doctors have to show their confidence in treatment of patients. The study also discussed with patients on the belief in cure of disease from prescription of doctor. Data shows that there was maximum 24(45.3%) percentage of respondents rated the status as good to belief on Doctor followed by 17(32.1%) rated as fair status, and 11(20.8%) rated as excellent status. Apart from this, very few 1(1.9%) number of patients rated as poor status to belief in prescription of doctor to cure their health problem. On aggregate, majority of patients' belief in cure of disease from prescription of doctor was fine.

Finally, the study team asked the question to patients about the reliability of Lab Report of Ganeshman Singh Memorial Hospital and Research Center. The data shows that there was



maximum 25(47.2%) number of respondents reported that it was good followed by 19(35.8%) reported fair, and 7(13.2%) reported excellent. Besides that, some 2(3.8%) patients said that the lab report of Ganeshman Singh hospital was not reliable so they rated it as poor. Though, in total, majority had positive response on quality of lab report.

### Time Required to Consult the Doctor

The study had discussed with the patients to know the time required to consult the doctors from the time of registration to health check-up.

*Table 4: Time required to consult the doctor*

| Descriptive Statistics  |    |         |         |         |                |
|---|----|---------|---------|---------|----------------|
|   | N  | Minimum | Maximum | Mean    | Std. Deviation |
| Time required to consult the doctor from the time of registration/ticketing | 53 | 5.00    | 60.00   | 21.6981 | 12.46932       |

**Source:** Field Survey, 2020

The study found that the time required to consult the doctor from the time of registration/ticketing was minimum 5 minute to maximum 60 minute. The average Time required to consult the doctor from the time of registration/ticketing was 21.69 minutes.

### Hospital Expenses

The cost of hospital is one of the main barriers of patients to visit the health facilities. In the modern time, the health expenditure is increasing day by day due to use of new technology in diagnosis and lab test. So poor family fear to visit the health post due to unaffordable hospital cost. In this connection, the study team had discussed with the patients and patient's party to know their experience on hospital cost of Ganeshman Singh Memorial Hospital and Research Center. The findings are presented in the below Table 5.

Data was collected from the respondents by asking the question about the Hospital cost/expenses - Cost of registration. The data shows that there was maximum 29(54.7%) percentage of patient stated that the cost of registration was fair followed by 10(18.9%) stated cheap, 9(17%) stated expensive, and 3(5.7%) stated cheaper. Some 2(3.8%) of the patients stated that the cost was more expensive. The expenses of hospital cost depend upon the economic condition of individual patient also so same cost can have different impact on the experience of patient. Though, in average, majority of patients stated that Hospital cost/expenses - Cost of registration was affordable.

*Table 5: Hospital Expenses*

| SN | Statement   | More<br>expensive | Expensive | Fair | Cheap | Cheaper | Total |
|----|---|-------------------|-----------|------|-------|---------|-------|
| 1. | Hospital cost/expenses - Cost of registration.                    | 3.8               | 17.0      | 54.7 | 18.9  | 5.7     | 100.0 |
| 2. | Hospital cost/expenses - Cost of consultation fees of the doctor. | 7.5               | 24.5      | 56.6 | 7.5   | 3.8     | 100.0 |
| 3. | Hospital cost/expenses - Cost of diagnosis/lab test               | 5.7               | 17.0      | 62.3 | 15.1  | -       | 100.0 |
| 4. | Hospital cost/expenses - Cost of medicines                        | 11.3              | 22.6      | 52.8 | 13.2  | -       | 100.0 |
| 5. | Overall, how would you rate your experience?                      | -                 | 9.5       | 47.2 | 30.2  | 13.2    | 100.0 |

Source: Field Survey, 2020

The study had asked to the patients about the cost of consultation fees of the doctor. The data shows that the majority 30(56.6%) of patients stated that the cost of consultation fee of doctor was fair in the hospital followed by 13(24.5%) stated that cost of consultation was expensive, 4(7.5%) stated more expensive. Though, 4(7.5%) patients stated that consultation fee was cheap and 2(3.8%) patients felt that it was cheaper. On aggregate, majority of respondents replied that Hospital cost/expenses - Cost of consultation fees of the doctor were fair. Around 20% patients stated that the cost of hospital was expensive for them. It might be that their economic status was not good so they felt costly in comparison of other majority of patients.

The study team had asked the cost of diagnosis/lab test. The data presented in above Table 5 shows that there were majority 33(62.3%) patients shared that the cost of diagnosis and lab test was fair in hospital whereas low number 3(5.7%) of patients stated that the cost of diagnosis and lab test was more expensive. Though, majority of patients shared that the cost of diagnosis and lab test was not so expensive. The finding indicates that cost of hospital may not be barrier for the visitor because it was affordable for the general people.

Similarly, the study explored the experience of patients about the cost of medicine. The patients and visitors of Hospital were asked about the cost they had to paid for medicine as prescribed by the Doctor. The data shows that there was majority of respondents 28(52.8%) responded that see the cost of medicine was fair for them whereas 12(22.6%) respondents stated expensive, and 6(11.3%) stated more expensive. In average, around 66% patients shared that the Hospital cost/expenses of medicine was affordable for them.

Finally, the study team requested to patients and visitors to rate the ranking of Hospital based on their experience of hospital cost. In this response, majority respondents 25(47.2%) rated as fair status hospital followed by 16(30.2%) rated as cheap, 7(13.2%) rated cheaper. Apart from this, some 5(9.5%) of the patients rated that in overall the cost of hospital was expensive.

### Conclusion of the Study

The study has focused on the identification and exploration of demographic distribution of patients and visitors of Ganeshman Singh Memorial Hospital and Research Center, facilities available in Hospital and medical expenses of hospital. The key findings presented in the below Figure 1 shows that comparatively Services by the paramedical staff (OPD nurses) has highest mean value (mean = 4.17) which is closed to the excellent performance of hospital whereas the lowest mean was 3.57 rated for the cleanliness of the hospital, including the reception area, OPD and surrounding area. Though, in average (mean = 3.77), facilities of Hospital were rated as ‘Good’ in total.

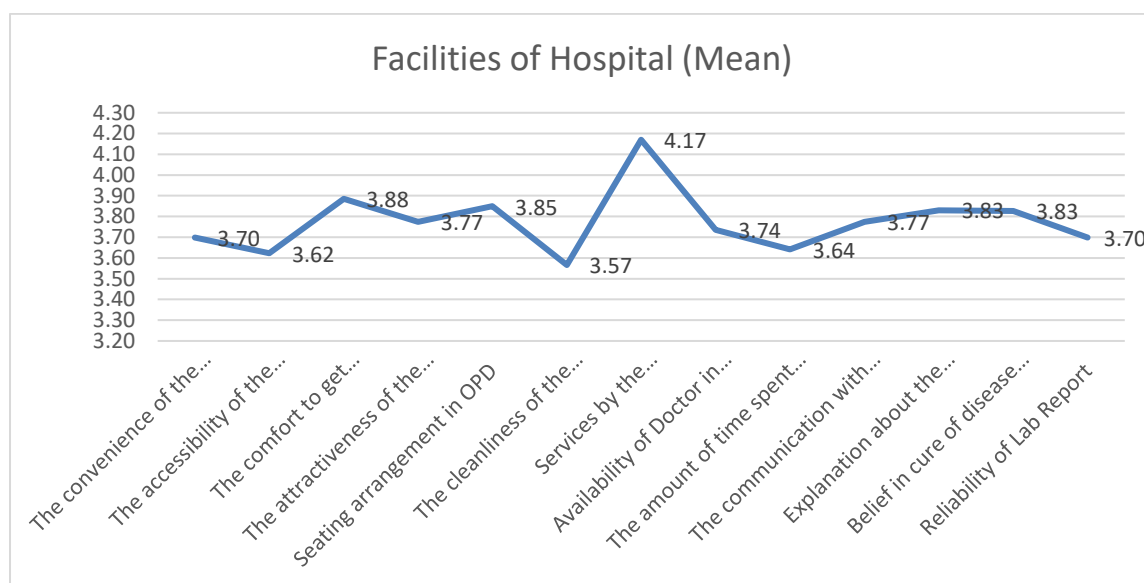


Figure 1: Facilities of Hospital (Mean value)

Similarly, the study had also discussed on the hospital expenses for treatment of patients. The key findings presented in the below Figure 2 shows that cost of medicine was slightly expensive in comparison of other cost like consultation fee, cost of diagnosis and lab test and registration. The patients had rated the cost of hospital in totality as ‘Good’ status, which indicates that the total cost of treatment was affordable for the patient.

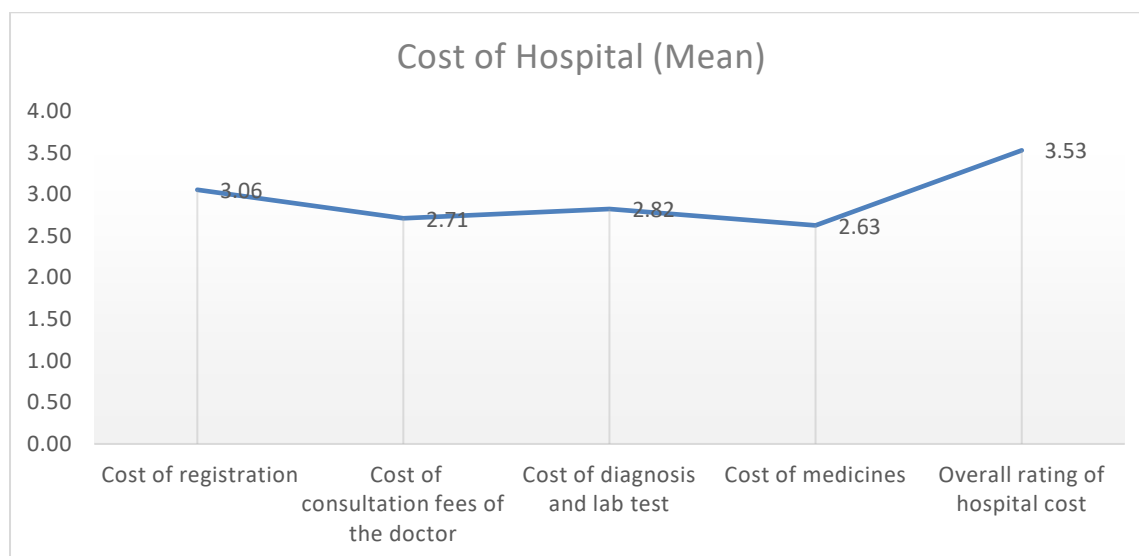


Figure 2: Hospital cost (Mean value)

### Recommendation of the Study

The study had collected the data focusing on the service quality of hospital only so on the basis of findings of this study, the study has following recommendations to the hospital:

1. The hospital should improve in maintenance of seating arrangement for visitors and patients in reception area and OPD.
2. The hospital should improve in the cleanliness of the hospital, including the reception area, OPD and surrounding area.
3. The hospital should arrange the disease specific doctors as the request and need of patients and also try to reduce the time to meet the doctors by arranging health assistance who can engage the patients in initial examination/diagnosis of case history.
4. The hospital should improve the quality of lab report also.
5. The hospital should consider the cost of medicine and consultation fee of doctor because many patients reported that it was more expensive for them. Hospital can develop the policy to provide some discount for the poor people.

### Acknowledgement:

The research team is thankful to the patients and visitors who actively participated in the study and provided their valuable time and information. Besides that, the team is also thankful to the management team and staffs of Ganeshman Singh Memorial Hospital and Research Center, Lalitpur, Nepal who actively mobilized in data collection and coordination work. Besides that, the team is thankful to the research team of Nepal Philosophical Research Center (NPRC) for their technical assistance to conduct the research and to publish in journal.

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