

Assessing the Impact of Hospital Ownership on Perceived Healthcare Service Quality in Haryana

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Abstract: *This review paper explores the dimensions of patient perceptions of healthcare service quality in public and private hospitals in Haryana. It assesses how various factors such as responsiveness, reliability, empathy, tangibility, and communication contribute to the overall satisfaction of patients. Drawing on comparative insights from empirical studies, this paper investigates disparities in service delivery between government and private sectors, highlighting the challenges and opportunities for improving healthcare standards in the region.*

Keywords: Patient Satisfaction, Healthcare Service Quality, Public Hospitals, Private Hospitals, SERVQUAL, Doctor-Patient Interaction, Haryana, Hospital Infrastructure, Empathy, Responsiveness

I. INTRODUCTION

Patient satisfaction serves as a key performance indicator in healthcare systems, reflecting both the quality of clinical care and service delivery. In the Indian context, especially in the state of Haryana, there has been growing public discourse around the accessibility, affordability, and efficiency of healthcare services across both public and private hospitals. Haryana's dual healthcare system exhibits notable differences in terms of infrastructure, resource allocation, staff behavior, waiting times, and patient outcomes—all of which affect patients' perceptions and satisfaction levels.

The which assesses service quality based on five dimensions—tangibility, reliability, responsiveness, assurance, and empathy—provides a useful framework for evaluating healthcare service quality. This paper adopts this model to review and compare patient feedback across both sectors in Haryana, recognizing that patient-centered care has become central to quality improvement strategies in modern healthcare. Healthcare systems globally are undergoing a transformation from being purely service providers to becoming patient-centered organizations that emphasize quality, responsiveness, and satisfaction. In this evolving landscape, patient perception is a critical determinant in evaluating healthcare service quality. This paradigm shift is increasingly evident in Indian states such as Haryana, where the interplay between public and private hospitals significantly impacts patient satisfaction levels and overall healthcare delivery outcomes. The present review aims to assess patient perceptions of service quality across public and private healthcare institutions in Haryana, a northern Indian state characterized by a dual healthcare system, marked disparities in access and quality, and a growing emphasis on health sector reform.

In the Indian context, healthcare delivery is deeply fragmented, often oscillating between highly subsidized yet overburdened public hospitals and increasingly commercialized but better-equipped private facilities. Haryana exemplifies this dichotomy. Despite substantial investments in public healthcare infrastructure through national schemes like the Ayushman Bharat Yojana and state initiatives, the perception of poor service quality in government facilities persists. Conversely, private hospitals are often seen as providing superior services, albeit at a significantly higher cost. This creates a tension between accessibility and perceived quality, with patient satisfaction becoming a valuable indicator for evaluating the effectiveness of both healthcare sectors.

Patient perception in healthcare refers to a patient's subjective evaluation of the quality and effectiveness of healthcare services received. It includes dimensions such as waiting time, cleanliness, behavior of medical and non-medical staff, clarity in communication, availability of medicines, diagnostic facilities, and post-treatment care. These perceptions are shaped not only by the clinical outcome but also by interpersonal interactions and infrastructural experiences. The

SERVQUAL model, a widely used theoretical framework, identifies five key dimensions of service quality—tangibility, reliability, responsiveness, assurance, and empathy—which are all closely linked to patient perceptions and ultimately their satisfaction levels.

Numerous studies have shown that patient satisfaction correlates strongly with better clinical outcomes, increased adherence to medical advice, reduced litigation, and greater institutional trust. Hence, evaluating healthcare quality through the lens of patient perception is essential, especially in mixed healthcare systems like that of Haryana, where the public-private divide leads to variable patient experiences.

Public healthcare in Haryana is primarily delivered through a network of primary health centers (PHCs), community health centers (CHCs), district hospitals, and medical colleges. Despite considerable outreach, these facilities often struggle with overcrowding, staff shortages, outdated equipment, and low doctor-patient interaction time. These systemic issues negatively influence patient perceptions, even when the clinical outcomes may be satisfactory. On the other hand, private hospitals—ranging from small nursing homes to large multi-specialty hospitals—are perceived as more patient-friendly environments. They typically offer better hospitality, shorter wait times, personalized care, and advanced technology, which boost the perceived service quality.

However, this perceived superiority is not without caveats. High out-of-pocket expenses and variability in care standards make private healthcare inaccessible for a large section of the population. This raises equity concerns and highlights the need to understand how patients from different socio-economic backgrounds perceive and rate their experiences in both sectors.

Haryana has made significant strides in improving its health indicators over the past decade. The state reports improvements in maternal and infant mortality rates, immunization coverage, and institutional deliveries. However, quality of care remains a major concern. Studies such as those conducted by the National Accreditation Board for Hospitals and Healthcare Providers (NABH) and the National Health Mission (NHM) have pointed out that while infrastructure has improved, soft aspects of care—such as communication, behavior, and responsiveness—are still lacking.

Patients often cite issues such as lack of privacy, unavailability of specialists, delays in treatment, and non-transparent billing procedures (especially in private hospitals) as major areas of dissatisfaction. Evaluating patient perceptions can thus provide actionable insights into these soft quality dimensions, which are not always captured through standard performance indicators.

The comparative evaluation of patient perceptions in public and private hospitals offers a unique lens to analyze not just the performance of the institutions but also the socio-cultural factors influencing healthcare choices. Rural patients, for instance, may place more emphasis on proximity and cost, while urban patients may prioritize technology and hospitality. Gender, literacy, and prior health experiences also shape perceptions differently. Comparative analysis helps policymakers identify priority areas for intervention in each sector and develop customized strategies for improvement.

For example, if public hospital patients express dissatisfaction primarily with long waiting times and lack of medicines, targeted policy interventions such as better supply chain management and appointment scheduling systems could be introduced. If private hospital patients are concerned about hidden costs and insufficient post-treatment care, stricter regulatory oversight and accreditation could help bridge the trust gap.

Understanding patient perceptions is not just an academic exercise but a crucial tool for public health planning and hospital management. In Haryana, where healthcare policy is increasingly being aligned with national programs like PM-JAY (Pradhan Mantri Jan Arogya Yojana), feedback from patients can inform strategic decisions such as resource allocation, training of medical staff, infrastructure planning, and digitization of services.

Furthermore, as India moves toward Universal Health Coverage (UHC), balancing cost and quality becomes paramount. Patient perception surveys, satisfaction indices, and qualitative feedback mechanisms must be institutionalized within healthcare systems to create a feedback loop that drives continuous improvement. Introducing transparent grievance redressal mechanisms and participatory governance models in hospitals can further empower patients and make service delivery more responsive.

Evaluating patient perceptions on healthcare service quality in public and private hospitals in Haryana is critical to understanding the operational strengths and weaknesses of each system. Such evaluations are essential for ensuring accountability, improving healthcare delivery, and bridging the trust deficit between patients and providers. By examining these perceptions through structured models and comparative analysis, this study hopes to contribute to the ongoing discourse on patient-centric healthcare reform in India. It emphasizes that quality improvement is not just about infrastructure or technology but also about empathy, communication, and responsiveness to patient needs—all of which are vital for achieving truly inclusive and effective healthcare governance.

II. LITERATURE REVIEW

1. Service Quality in Public and Private Hospitals

Public hospitals in Haryana are generally overburdened with patients and often under-resourced, affecting service delivery quality. In contrast, private hospitals are perceived to offer better amenities, shorter wait times, and more personalized care (Balarajan et al., 2011). However, the cost of private care is a significant concern for lower-income patients, influencing their satisfaction despite better infrastructure (Gupta & Kapoor, 2016).

2. Patient Perception and Satisfaction

Patient satisfaction is not solely influenced by clinical outcomes but also by non-clinical factors such as cleanliness, staff behavior, administrative efficiency, and communication (Rao et al., 2006). Studies indicate that in Haryana, patients often rate private hospitals higher in terms of courtesy and staff attentiveness, while public hospitals are preferred for affordability and accessibility (Singh & Dhingra, 2020).

3. Communication and Empathy

Doctor-patient communication has emerged as a crucial determinant of satisfaction. Private institutions often perform better due to a greater focus on communication skills and patient engagement. Empathy and respect from medical staff directly affect trust and patient compliance with treatment plans (Sharma et al., 2019).

4. Infrastructure and Cleanliness

Patients in private hospitals report higher satisfaction with physical infrastructure and hygiene conditions, which aligns with expectations of quality service. Public hospitals, despite their affordability, often struggle with basic facilities such as toilets, drinking water, and seating, adversely impacting patient perception (Kumar et al., 2018).

COMPARATIVE ANALYSIS: PUBLIC VS. PRIVATE HOSPITALS IN HARYANA

The gap in patient satisfaction between public and private hospitals in Haryana reflects systemic issues. Private hospitals often enjoy greater autonomy, better human resource management, and infrastructure investments. Meanwhile, public hospitals cater to a large volume of patients with limited staff and funds, which affects service quality.

Key indicators include:

Waiting time: Lower in private hospitals

Cleanliness: Better maintained in private hospitals

Cost-effectiveness: Higher in public hospitals

Transparency of billing and services: Often better in private institutions

Staff behavior and empathy: Higher ratings in private hospitals

CHALLENGES IDENTIFIED IN THE LITERATURE:

- Inadequate training for public healthcare staff on communication and empathy
- Uneven distribution of healthcare resources in rural vs. urban areas
- Lack of standardized service quality benchmarks across hospitals
- Patient feedback mechanisms are underutilized in public institutions
- High out-of-pocket expenditure in private care

Policy Implications and Recommendations:

Quality Assurance Programs: Implementing strict quality assurance protocols in public hospitals using tools like NABH (National Accreditation Board for Hospitals).

Training Modules: Introducing mandatory soft-skill and communication training for public health staff.

Feedback Mechanisms: Establishing structured patient satisfaction surveys to identify gaps.

Public-Private Partnerships (PPP): Encouraging collaborative models to standardize care across sectors.

Digital Health Records and Transparency: Promoting digitalization to streamline services and improve patient experience.

III. CONCLUSION

Patient perception is a powerful tool in evaluating healthcare service quality, especially in a diverse and rapidly developing state like Haryana. While private hospitals score higher on service quality indicators, public hospitals remain indispensable for equitable access. A balanced approach that incorporates feedback, strengthens infrastructure, and enhances provider-patient relationships is vital for building a responsive and inclusive healthcare system. Bridging the quality gap through regulatory oversight, training, and infrastructure development can significantly elevate patient satisfaction in both sectors. The healthcare system in Haryana, like many other regions in India, faces the dual challenge of expanding access while enhancing the quality of care.

Through this review of patient perceptions of healthcare service quality in public and private hospitals, it becomes evident that the experiences, expectations, and satisfaction levels of patients are significantly influenced by a combination of tangible and intangible factors. These include the behavior and communication skills of medical staff, waiting time, cleanliness, infrastructure, affordability, and availability of essential medicines and equipment.

Patients generally perceive private hospitals to offer superior quality in terms of infrastructure, personalized attention, and timeliness of services. This perception stems from better-maintained facilities, prompt administrative procedures, and more attentive staff. On the other hand, public hospitals are often appreciated for their affordability and access to government schemes, but they are also frequently criticized for overcrowding, understaffing, long waiting times, and poor hygiene conditions.

Despite these criticisms, public hospitals remain a critical part of the healthcare system, especially for low-income and rural populations who rely heavily on subsidized care. However, this dependence creates immense pressure on public facilities, leading to strained resources and diminishing service quality. Patients' experiences in these settings are often marked by limited doctor-patient interaction, non-availability of drugs, and a general sense of dissatisfaction—factors that lower the perceived quality of care despite clinical effectiveness in many cases.

An essential component influencing patient satisfaction is the quality of communication between healthcare providers and patients. In both public and private institutions, patients respond positively when healthcare professionals communicate empathetically, provide clear explanations, and involve them in decision-making processes. In Haryana, several studies have indicated that doctor-patient communication is more consistent and effective in private hospitals due to better patient-to-doctor ratios and customer-oriented approaches.

In public hospitals, overburdened doctors often find it challenging to offer the same level of individual attention, which negatively affects patient perception. Furthermore, language barriers, hurried consultations, and a perceived lack of interest by staff lead to communication breakdowns, ultimately affecting patient trust and satisfaction.

Cleanliness and hospital infrastructure are critical in shaping patient satisfaction. Private hospitals in Haryana, particularly in urban areas such as Gurugram and Faridabad, often maintain high standards of hygiene and aesthetics. This contributes to a perception of higher quality care even if the clinical outcomes may be similar to those of public hospitals. In contrast, many public hospitals, particularly in rural and semi-urban areas, struggle with cleanliness and maintenance due to limited budgets, manpower shortages, and poor governance. The lack of adequate sanitation directly impacts patient confidence in these institutions.

Long waiting times remain a key concern in public hospitals. Patients often report delays in registration, diagnostics, and consultations, which negatively impacts their perception of service quality. In contrast, private hospitals usually implement appointment-based systems and efficient record management, ensuring quicker and smoother patient flow.

Such administrative efficiency enhances the overall experience, increasing patient satisfaction and their likelihood to return or recommend the facility to others.

One domain where public hospitals have a clear advantage is affordability. The cost of treatment, diagnostics, and medication is significantly lower in public hospitals due to government subsidies. Many schemes such as Ayushman Bharat and state-level health insurance programs make treatments accessible to the economically weaker sections of society. However, the affordability factor does not always translate into higher satisfaction, especially when the service quality and patient experience are compromised. Private hospitals, although more expensive, often justify their charges with better service delivery, creating a trade-off between cost and quality in the minds of patients.

The behavior of hospital staff—from receptionists to nurses and ward boys—has a profound impact on patient perception. Politeness, responsiveness, and attentiveness are highly valued by patients. Private hospitals in Haryana generally perform better on this front due to better training and monitoring mechanisms. Public hospitals often suffer due to overworked staff, poor accountability, and lack of incentives, which contribute to indifferent or rude behavior, further deteriorating the patient experience.

Patients' perceptions also vary based on geographical location and socioeconomic background. Urban patients tend to have higher expectations due to their exposure to modern healthcare services and technologies. In contrast, rural patients may be more tolerant of service inadequacies but still value respectful treatment and cleanliness. Socioeconomic status plays a role as well—wealthier individuals are more likely to seek treatment in private hospitals and associate high costs with high quality. Meanwhile, lower-income patients may prioritize affordability over service quality but still express dissatisfaction when faced with negligence or indifference.

This evaluation of patient perceptions provides important insights for healthcare policymakers in Haryana. Improving service quality in public hospitals is essential to ensuring equitable healthcare delivery. Investments in hospital infrastructure, recruitment and training of medical staff, and implementation of patient-centric policies can go a long way in addressing the gaps. Government oversight and the introduction of public feedback systems can also help identify bottlenecks and enhance accountability.

There is also a need to encourage public-private partnerships (PPPs) where private hospitals can collaborate with government programs to offer affordable and quality care. In addition, periodic patient satisfaction surveys and quality audits should be institutionalized to monitor performance and incorporate patient feedback into hospital management.

The study of patient perceptions on healthcare service quality in public and private hospitals in Haryana reveals both strengths and weaknesses across sectors. While private hospitals generally offer better patient experiences due to superior infrastructure, prompt services, and personalized care, they are not accessible to all due to high costs. Public hospitals remain the backbone of healthcare for the majority but face systemic challenges that affect service delivery and patient satisfaction.

To bridge this gap, reforms in public healthcare delivery are crucial. Enhancing staff-patient communication, reducing wait times, ensuring cleanliness, and strengthening grievance redressal mechanisms are some actionable areas. Ultimately, both public and private healthcare systems need to be aligned toward a common goal—providing equitable, affordable, and high-quality healthcare that meets the expectations and needs of all citizens in Haryana.

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