

Patient Satisfaction in Selected Government Hospitals of Uttarakhand: A Study Based on Patient Perceptions.

Mr. Rituraj Das (Research Scholar, Maya Devi University), Dr. Ajay Chaurasia (Associate Professor, Maya Devi University), Ms. Nupur Singh (Assistant Professor, Maya Devi University), Ms. Shivani Bhatt (Assistant Professor, Maya Devi University), Mr. Uttam Negi (Teaching Associate, Maya Devi University).

ABSTRACT

Patient satisfaction is widely regarded as an essential marker for the quality and effectiveness of healthcare delivery. This is especially true for publicly funded healthcare facilities where ensuring access and affordability are the main priorities. This paper is an attempt to measure the patient satisfaction level in a few government hospitals of Uttarakhand. The study is based on patient perceptions and experiences of these hospitals. The research explores multiple facets of hospital service such as the availability of hospital facilities, the attitude of doctors and nursing staff cleanliness waiting time, availability of medicines, diagnostic services, and overall satisfaction with treatment. This research has been carried out on the basis of a survey conducted among patients visiting a few government hospitals of different regions of Uttarakhand. For the analysis of patient perceptions, a descriptive as well as analytical research design was adopted. The major factors affecting satisfaction levels have been identified with the help of statistical methods like percentage analysis, mean score, and comparative analysis. The research shows that although patients appreciate the low cost and easy availability of healthcare services provided by the government, they point out several serious problems such as overcrowding, very long waiting hours, poor condition of facilities, lack of medicines, and issues with sanitation. Meanwhile, a number of respondents credited the work and kindness of doctors and nurses at many hospitals. The article argues that public awareness of healthcare service quality, staff efficiency, hospital environment, and getting medical help on time largely determine patient satisfaction. The report asserts that building hospital infrastructure, revamping hospital operations, keeping sufficient medicines and medical workers, and providing patient-centered care throughout the healthcare process could be ways to deliver a more satisfactory experience for patients in the public hospitals of Uttarakhand. Overall, this study is expected to help healthcare providers and policy makers in delivering quality public healthcare services and building the public's faith in government hospitals.

KEYWORDS: Patient Satisfaction, Government Hospitals, Healthcare Services, Patient Perception, Service Quality, Public Healthcare, Uttarakhand

I. INTRODUCTION

One of the primary elements of human progress and social well-being is healthcare. A robust approach to healthcare can not only raise the health level of people but also add greatly to a nation's economic and social advancements. In a developing country such as India, public hospitals are the main source of affordable and accessible healthcare for a majority of urban and rural population, especially the economically disadvantaged communities. Due to factors like population growth, changing disease patterns, and increased healthcare standards, providing quality treatment and satisfying patients have become major issues that healthcare managers and policy-makers are continually addressing. Satisfaction of patients is generally considered as a key factor to determine the outcomes, efficiency, and quality of healthcare services. It is a measure of how well healthcare services fulfill the hopes and requirements of patients. Globally, healthcare providers have been gradually shifting their focus towards patient-centered care, which means that the experiences, views, and satisfaction of patients are given utmost importance for enhancing healthcare delivery systems. Apart from building a good image and trust of the hospital, patient satisfaction also leads to higher levels of treatment adherence, patient retention, and better overall health results.

In India, government hospitals support millions of people daily by offering medical services that are either very cheap or free. Even though these hospitals play an important role in ensuring public health, they often experience problems such as too many patients, lack of enough doctors and nurses, poor facilities, very long queues, lack of medical equipment, and shortage of medicines. These problems can definitely change how patients view the hospitals and their level of satisfaction. However, government hospitals are still the main healthcare choice for many people because of their low cost and the fact that public healthcare centers are everywhere. Uttarakhand provides an interesting background

for the research of patient satisfaction in government hospitals. The state features difficult and scattered mountainous terrain, isolated rural populations, and different levels of health service accessibility. The major part of the state government's work is getting healthcare to the hilly and remote areas. The government hospitals of Uttarakhand are poised to provide healthcare services to both urban and rural populations despite the limited resources and the difficult environment. Therefore, patient feedback about healthcare services is crucial for pointing out implementation gaps and making improvements in the overall health system.

Waiting times at the clinic can make or break a visit. Patients often feel frustrated when they've to stand for hours just to see a doctor, Mainly during peak hours. The actual experience depends heavily on how staff respond - whether they listen. Explain things clearly, or rush through appointments. Clean rooms and tidy exam areas also matter, and if those are ignored, people start losing faith in the place. Medicines being available right away helps too, though not every hospital manages that well. Patient surveys aren't just busywork anymore, they're part of how hospitals actually run now. When institutions track what patients say, they catch issues before they grow into bigger problems. Service flaws might show up in feedback loops that point directly to staffing gaps or poor scheduling. Policymakers rely on this data to decide where money goes next Whether clinics need upgrades or new equipment. In public health systems In particular, this kind of input keeps things honest and pushes change without delay. This research looks at patient satisfaction across government-run hospitals in Uttarakhand. It focuses on real voices from those who've actually gone through treatment. Examining how people feel about everything from wait times to bedside care, the study aims to uncover both what's working and what needs fixing. The goal isn't just numbers, it's understanding how daily experiences shape trust in local healthcare centers.

This research, "Patient Satisfaction in Selected Government Hospitals of Uttarakhand: A Study Based on Patient Perceptions, " is the present investigation that intends to measure the degree of satisfaction of patients who have been treated in some government hospitals of Uttarakhand. This research will aim at assessing patients' perceptions of different elements of healthcare delivery and determining the factors that affect their satisfaction levels. Besides that, it is an effort to see the good features and the flaws of government healthcare services as seen by patients. The work relies on primary data directly obtained from patients through a structured questionnaire. The research identifies the important dimensions of patient satisfaction such as medical services, staff behavior cleanliness availability of medicines, waiting time, infrastructure, and overall hospital management. After analyzing the responses of patients, the study aims to present helpful suggestions to upgrade the quality of healthcare services in public hospitals. This study holds great importance as enhancing patient satisfaction may result in increased healthcare utilization, greater trust in public hospitals, and overall better public health outcomes. The study's outcomes may be beneficial for hospital administrators, healthcare professionals, and government officials to comprehend patient requirements and formulate measures to improve the healthcare system in Uttarakhand.

I. BACKGROUND

The delivery of healthcare services is a critical element for the social and economic progress of a country. A well-functioning healthcare system not only safeguards the health of its citizens but also contributes to higher productivity, lower death rates, and a better overall quality of life. In India, which is still a developing country, public healthcare still represents the backbone of the hospital system, with government hospitals, in particular, serving as the primary medium through which affordable and easily accessible medical care is provided to a large population. Government hospitals hold a crucial position as they cater to the necessities of low-income families, the rural populace, and less privileged segments of society who may find even the least expensive private healthcare facilities out of their financial reach. In the course of time, healthcare in India has seen a radical transformation due to factors such as the growth of the population urbanization increased health consciousness, technological innovations, and the ever-growing expectations of the patients. Today, the assessment of healthcare delivery goes beyond merely focusing on the medical treatment results and also includes consideration of the quality aspects of the services offered to the patients. In connection with this, patient satisfaction represents one of the key criteria for measuring the performance and viability of hospitals and other healthcare providers.

Patient satisfaction means how well patients think their healthcare needs, expectations, and preferences have been met by healthcare providers. It depends on many things like the quality of treatment, the conduct of doctors and nurses communication availability of medicines, waiting time cleanliness hospital facilities, administrative services, and the overall healthcare experience. When a patient is happy with the services, he or she will most probably trust the healthcare providers, adhere to the medical instructions, keep the treatment, and even suggest the healthcare services to others. That is why understanding what patients think is important for improving healthcare quality and providing patient-centered care.

Government hospitals in India are suffering from several problems, which in turn are directly affecting the level of patient satisfaction. These include overcrowdedness, lack of sufficient medical staff, poor infrastructure, not enough medical equipment, scarcity of medicines, lack of cleanliness, and very long waiting times. Even though the government has made available different healthcare schemes and policies in an effort to enhance the public healthcare services, many hospitals are still unable to offer patients efficient and satisfactory services. As a result, there is an increasing demand to measure patient experiences and to pinpoint the shortcomings in the healthcare delivery systems.

The state of Uttarakhand poses a very specific healthcare scenario owing to its geographical and socio-economic features. Most of the state is mountainous with sparsely populated villages and difficult access, which makes it a problem in terms of reaching and providing healthcare services. Many villages are nestled up in the mountains where the transport and healthcare facilities remain quite limited. So, government hospitals and healthcare centers turn out to be the main source of medical care for a large section of the population. The Uttarakhand government has recently focused on healthcare improvement through building medical infrastructure, increasing the number of medical facilities, hiring more health professionals, and launching different public health programs. Even with the implementation of these measures, patients in many localities still experience problems such as lack of adequate facilities, unavailability of medical specialists, absence of modern diagnostic services, overcrowding, and delayed treatment. These result in a substantial shaping of the patients' attitudes and beliefs about the quality and effectiveness of healthcare services offered in government hospitals.

Patient perception studies are important as they give a voice directly to healthcare users about the strengths and weaknesses of hospital services. With direct feedback from patients, it becomes easier for hospital management and policymakers to gauge patient desires, and pinpoint the issues that need fixing without delay. In addition to that, evaluating patient satisfaction is one of the ways through which a hospital is better managed, staff members performance is enhanced, resources are efficiently allocated, and health outcomes are improved. Besides, in public healthcare delivery systems, it is patient satisfaction studies that help in accountability and transparency of healthcare services. For example, a number of studies made in India and other countries have identified the major influencers of patient satisfaction to be: staff behavior, doctor-patient communication, hospital's hygienic state, waiting time and availability of facilities. Nevertheless, there are various factors which influence patient satisfaction level, like the condition of the local area, hospital infrastructure, patients' socio-economic background, and healthcare service accessibility. Thus, it is essential to conduct studies that are specific to a particular region in order to understand the local healthcare situation and patients' experiences.

II. LITERATURE REVIEW

Patient satisfaction is now a focal point in the healthcare research community as the major basis for measuring the degree of quality and efficiency of healthcare services rendered by hospital and other healthcare stations. With reference to [Diogo Cunha Ferreira et. al \(2023\)](#), patient satisfaction is considered one of the primary indicators of healthcare quality, and it can significantly contribute to the evaluation of hospital performance. He was of the opinion that patient satisfaction depends on medical treatment, and other factors, such as communication, staff behavior, hospital environment, and availability of facilities, as well. Their research have also pointed out that patient responses give healthcare facilities the opportunity to find their weaknesses and enhance patient-centeredness in care. In a study of patient satisfaction in allopathic health facilities run by the government in India, [Kumari et al. \(2009\)](#) discovered that the majority of patients were happy with the treatment given by doctors and nurses. However, the study also brought to light that there was discontent concerning overcrowding, poor sanitation, long waiting times, and insufficient infrastructure in government hospitals. The researchers felt that improving hospital administration, cleanliness, and the management of resources are some of the steps needed to raise patient satisfaction in public healthcare institutions. In their research, [Venkatashiva Reddy B. Et. al \(2018\)](#) focused on patient satisfaction in the healthcare facilities of the mountainous region of Uttarakhand. Their research revealed that one of the biggest issues with healthcare access in these remote areas is the physical barriers of the terrain and transportation. On top of that, the research showed that patients were happy with doctors' demeanor and interpersonal communication but were dissatisfied with infrastructure and lack of specialized medical services. The authors gave rise to discussion on the topic of improving healthcare facilities in rural and remote areas of Uttarakhand. [Sandeep & Praveen Kumar \(2024\)](#) through the use of the SERVQUAL model assessed service quality and patient satisfaction in both public and private hospitals of Uttarakhand. The research looked into the five areas of service quality: tangibility reliability responsiveness, assurance, and empathy. Results indicated that private hospitals were superior in the areas of infrastructure and responsiveness, whereas government hospitals were liked for their affordability and accessibility. The study remarked that by upgrading staff responsiveness and hospital facilities, patient satisfaction in the public hospitals can be maximized.

[Rudramma J et. al \(2023\)](#) reported that patient satisfaction was largely impacted by the interpersonal behaviour and communication skills of doctors in a government teaching hospital. Yet, these factors did not cover patient dissatisfaction related to hospital cleanliness, waiting time, and convenience of services. They recommended that frequent patient satisfaction surveys should be implemented as a tool for monitoring healthcare quality and enhancing hospital management practices. [Ware et al. \(1977\)](#) made a significant contribution by proposing a framework for measuring patient satisfaction which includes various dimensions that shape patient perceptions such as technical quality availability interpersonal aspects communication financial factors, and continuity of care. Their research has been a basis for many subsequent studies on healthcare quality and patient satisfaction measurement. They pointed out that patient satisfaction has multiple facets and is affected by both clinical and non-clinical aspects of healthcare services. According to [Cleary and McNeil \(1988\)](#), patient satisfaction is a key element in assessing healthcare quality. The authors pushed the point that hospitals should be continuously gathering patient responses to better understand patient expectations and enhance healthcare results. In their view respect empathy, and communication are the top three

factors that heavily shape patients' perceptions regarding healthcare services.

Introduced by [Zeithaml, Berry, and Parasuraman](#) in 1988 SERVQUAL model dramatically intensified the understanding of service quality and customer satisfaction. The authors of the model noticed that reliability assurance tangibility, empathy and responsiveness are indicators of the service quality. It was the healthcare sector that initially adopted this tool for patient satisfaction measurement and hospital service evaluation. [Chi Zhou et al. \(2023\)](#) made it clear that patient satisfaction is a decisive factor in compliance with treatment and trust in healthcare institutes. They revealed that satisfied patients are those who obey the doctor's instructions and seek the treatment on a regular basis. The authors stressed that care that revolves around the patients and good communication contribute to the improvement of healthcare experiences and results. [Beata Gavurova et. al \(2021\)](#) in their research on patient satisfaction determinants pointed out that waiting time cleanliness staff behavior and quality of treatment are the primary facets which affect patient perceptions. They also highlighted the role of efficient hospital management and adequate healthcare infrastructure in enhancing patient satisfaction and sustaining the public trust in healthcare systems.

VI. OBJECTIVES

1. To examine the level of patient satisfaction in selected government hospitals of Uttarakhand.
2. To analyze patients' perceptions regarding the quality of healthcare services provided in government hospitals.
3. To evaluate the impact of factors such as staff behavior, cleanliness, waiting time, and availability of medicines on patient satisfaction.
4. To identify the major problems faced by patients while availing healthcare services in government hospitals.
5. To suggest suitable measures for improving patient satisfaction and the overall quality of public healthcare services in Uttarakhand.

VII. RESEARCH METHODOLOGY

1. Research Design

The study is based on a **descriptive research design**. This design has been used to understand and describe patients' perceptions and satisfaction regarding healthcare services in government hospitals.

2. Nature of the Study

The study is empirical in nature and is based mainly on primary data collected from patients visiting government hospitals.

3. Sources of Data

The study is based on both primary and secondary data.

- **Primary Data**

Primary data has been collected through a structured questionnaire from patients visiting selected government hospitals in the Garhwal region of Uttarakhand.

- **Secondary Data**

Secondary data has been collected from books, journals, research articles, government reports, websites, and previous studies related to patient satisfaction and healthcare services.

4. Area of the Study

The study has been conducted in selected government hospitals of the Garhwal region of Uttarakhand. The districts included in the study are:

- Dehradun
- Haridwar
- Pauri Garhwal
- Tehri Garhwal
- Chamoli
- Rudraprayag
- Uttarkashi

5. Sample Size

The study is based on responses collected from **236 respondents**.

Sampling Technique

The respondents were selected using the **convenience sampling method**. Patients who were available and willing to participate during the survey were included in the study.

6. Research Instrument

A structured questionnaire was used for collecting primary data. The questionnaire consisted of demographic questions and 15 close-ended statements related to patient satisfaction.

The responses were measured using a **five-point Likert scale**:

- 1 = Strongly Disagree
- 2 = Disagree
- 3 = Neutral
- 4 = Agree
- 5 = Strongly Agree

The questionnaire focused on the following aspects:

- Doctors' behavior
- Nursing staff behavior
- Hospital cleanliness
- Waiting time
- Availability of medicines
- Diagnostic services
- Hospital infrastructure
- Overall patient satisfaction

7. Variables of the Study

Independent Variable

- Healthcare Service Quality

Dependent Variable

- Patient Satisfaction

8. Hypothesis of the Study

Null Hypothesis (H_0)

There is no significant relationship between healthcare service quality and patient satisfaction in selected government hospitals of Uttarakhand.

Alternative Hypothesis (H_1)

There is a significant relationship between healthcare service quality and patient satisfaction in selected government hospitals of Uttarakhand.

9. Statistical Tool Used

For hypothesis testing, only **Correlation Analysis** has been used. Correlation analysis helps in examining the relationship between healthcare service quality and patient satisfaction.

If the correlation between the variables is positive and significant, the null hypothesis will be rejected and the alternative hypothesis will be accepted.

10. Data Analysis and Interpretation

The collected data was coded, classified, and tabulated systematically. Microsoft Excel was used for data entry and analysis. Percentages, tables, and correlation analysis were used to interpret the data and present the findings.

11. Scope of the Study

The study focuses on patient satisfaction in selected government hospitals of the Garhwal region of Uttarakhand. The findings may help healthcare administrators and policymakers improve the quality of healthcare services and patient-centered care.

12. Limitations of the Study

1. The study is limited to selected government hospitals of the Garhwal region only.
2. The study is based on patient perceptions, which may vary from person to person.
3. The sample size is limited to 236 respondents.
4. Time and resource constraints limited wider data collection.

VIII. HYPOTHESIS TESTING

Complete Hypothesis Testing Calculations for All Respondents

Hypotheses

H₀: There is no significant relationship between healthcare service quality and patient satisfaction.

H₁: There is a significant relationship between healthcare service quality and patient satisfaction.

Pearson Correlation Formula

$$r = \frac{[N(\Sigma XY) - (\Sigma X)(\Sigma Y)]}{\sqrt{\{[N\Sigma X^2 - (\Sigma X)^2][N\Sigma Y^2 - (\Sigma Y)^2]\}}}$$

Concise Statistical Calculation Table (Grouped Frequencies)

To avoid an excessively long table for all 236 respondents, grouped statistical techniques were used. Respondents with identical X and Y values were grouped together.

X Score	Y Score	Frequency	Total XY	Contribution
1.17	1.67	1	1.95	1.95
1.25	1.67	2	2.09	4.18
1.25	2.0	2	2.5	5.0
1.33	1.33	1	1.77	1.77
1.33	1.67	2	2.22	4.44
1.33	2.0	3	2.66	7.98
1.42	1.67	8	2.37	18.96
1.42	2.0	3	2.84	8.52
1.42	2.33	1	3.31	3.31
1.5	1.67	3	2.5	7.5
1.5	2.0	3	3.0	9.0
1.5	2.33	1	3.5	3.5
1.58	1.67	3	2.64	7.92
1.58	2.0	4	3.16	12.64
1.67	1.0	1	1.67	1.67
1.67	1.67	2	2.79	5.58
1.67	2.0	4	3.34	13.36
1.67	2.33	2	3.89	7.78
1.75	2.0	5	3.5	17.5
1.75	2.33	1	4.08	4.08
1.83	1.33	1	2.43	2.43
2.0	1.67	2	3.34	6.68
2.08	2.67	1	5.55	5.55
2.17	2.67	1	5.79	5.79
2.33	2.33	1	5.43	5.43
2.33	2.67	2	6.22	12.44
2.33	3.0	3	6.99	20.97
2.42	2.33	2	5.64	11.28
2.42	2.67	2	6.46	12.92
2.42	3.0	5	7.26	36.3
2.5	2.33	2	5.82	11.64
2.5	2.67	9	6.68	60.12
2.5	3.0	4	7.5	30.0
2.5	3.33	1	8.32	8.32
2.58	2.33	1	6.01	6.01
2.58	2.67	5	6.89	34.45
2.58	3.0	5	7.74	38.7
2.58	3.33	1	8.59	8.59
2.67	2.33	1	6.22	6.22

2.67	2.67	5	7.13	35.65
2.67	3.0	3	8.01	24.03
2.67	3.33	1	8.89	8.89
2.75	2.67	2	7.34	14.68
2.75	3.0	1	8.25	8.25
2.75	3.33	1	9.16	9.16
2.83	3.0	1	8.49	8.49
2.83	3.33	1	9.42	9.42
2.92	2.67	1	7.8	7.8
2.92	3.0	2	8.76	17.52
3.17	4.0	1	12.68	12.68
3.25	3.67	4	11.93	47.72
3.33	3.67	5	12.22	61.1
3.33	4.0	2	13.32	26.64
3.42	3.33	1	11.39	11.39
3.42	3.67	5	12.55	62.75
3.42	4.0	6	13.68	82.08
3.5	3.33	2	11.66	23.32
3.5	3.67	5	12.84	64.2
3.5	4.0	2	14.0	28.0
3.58	3.67	4	13.14	52.56
3.58	4.0	2	14.32	28.64
3.58	4.33	1	15.5	15.5
3.67	3.33	3	12.22	36.66
3.67	3.67	3	13.47	40.41
3.67	4.0	4	14.68	58.72
3.67	4.33	1	15.89	15.89
3.75	3.67	2	13.76	27.52
3.75	4.0	2	15.0	30.0
3.83	4.0	1	15.32	15.32
3.83	4.33	1	16.58	16.58
3.92	3.67	2	14.39	28.78
4.17	4.67	2	19.47	38.94
4.17	5.0	1	20.85	20.85
4.25	4.33	1	18.4	18.4
4.25	4.67	2	19.85	39.7
4.25	5.0	2	21.25	42.5
4.33	4.67	4	20.22	80.88
4.33	5.0	8	21.65	173.2
4.42	4.33	1	19.14	19.14
4.42	4.67	5	20.64	103.2
4.42	5.0	6	22.1	132.6
4.5	4.67	3	21.02	63.06
4.5	5.0	5	22.5	112.5
4.58	4.33	1	19.83	19.83
4.58	4.67	3	21.39	64.17
4.58	5.0	1	22.9	22.9
4.67	4.33	1	20.22	20.22
4.67	4.67	2	21.81	43.62
4.67	5.0	7	23.35	163.45
4.75	4.67	2	22.18	44.36
4.83	5.0	1	24.15	24.15

Summation Values

Sample Size (N)	236
ΣX	713.75
ΣY	784.00
ΣXY	2647.47
ΣX^2	2437.27
ΣY^2	2897.78

Substitution in Formula

$$r = [(236 \times 2647.47) - (713.75 \times 784.00)] / \sqrt{[(236 \times 2437.27) - (713.75)^2] \times [(236 \times 2897.78) - (784.00)^2]}$$

Calculated Correlation Coefficient (r) = 0.967

P-Value = 0.0000000000

Decision

Since the p-value is less than 0.05, the Null Hypothesis (H_0) is Rejected and the Alternative Hypothesis (H_1) is accepted.

Interpretation

The study reveals a strong positive and statistically significant relationship between healthcare service quality and patient satisfaction among respondents from selected government hospitals of Uttarakhand.

IX. FINDINGS

Doctors listening closely to complaints was the biggest highlight for many patients. The research focused on how satisfied people were with care in select government hospitals across Garhwal, Uttarakhand. Data came from 236 individuals surveyed using a fixed form rated on a five-point Likert scale. Findings showed most felt fairly or very positive about services offered. Patients consistently praised staff for being helpful and open during visits. They said doctors explained concerns clearly and gave solid advice. Nurses and other workers also earned trust because they responded well to requests. Overall, those who shared feedback found the interaction fair and calming. For better or worse, care felt personal when staff paid attention instead of rushing through appointments. Realistically, patients liked knowing their needs were heard - no matter how small they seemed. Besides that, the results revealed the patients' level of satisfaction was most definitely dependent on elements like the cleanliness and hygiene condition of the hospital environment, the provision of medicines, diagnostic services, the arrangement of seats, and the giving of medical service within a short period. Many people who took part shared their happiness with the level of affordability and availability of healthcare in government hospitals, especially since that hospital offer cheap treatment to the less privileged sections of society. The presence of basic medical facilities and the availability of healthcare professionals in government hospitals were the factors that evolved positively patient trust and confidence in public healthcare institutions. Meanwhile, through the study, the researchers have been able to point out a few issues that lead to patient's dissatisfaction. Quite a number of them told about their experiences with the problems such as overcrowding in hospitals, long waiting hours for consultation and treatment, inadequate seating arrangements, shortage of medicines at times, and limited infrastructure facilities in some hospitals. Patients from rural and hilly areas were particularly concerned with their accessibility problems and delays in receiving specialized healthcare services due to geographical barriers and limited transportation facilities.

Healthcare service quality has a direct and positive impact on patient satisfaction, the research also found. Using Pearson Correlation Analysis as a statistical tool for testing the hypothesis, the study confirmed this link. The analysis consistently showed a very high positive correlation coefficient ($r = 0.967$) between healthcare service quality and patient satisfaction, demonstrating a very strong relationship between the two variables. The p-value that came out of the analysis was far below the conventional significance threshold of 0.05, which led to the rejection of the null hypothesis and acceptance of the alternative hypothesis. This is strong evidence that getting better at healthcare service quality leads to higher patient satisfaction in the target government hospitals of Uttarakhand. According to the findings,

doctor behavior, nursing staff support, hospital cleanliness infrastructure availability of medicines, diagnostic services, and shorter waiting times are the main factors that shape patient perceptions and drive overall satisfaction level improvement. As far as demographic characteristics go, the sample of respondents was quite diverse, including individuals from various age groups professions educational levels, and living in both rural and urban areas, thus offering a wide perspective on patients' views of public healthcare services. Most urban respondents indicated a relatively higher level of satisfaction with accessibility and infrastructure while rural respondents worried about transportation, access to healthcare, and the availability of specialized services in remote areas. Besides that, patient-centered care and good communication between healthcare professionals and patients were also shown to influence patient satisfaction significantly. Those who were treated with dignity, given adequate information, and attended to without delay were the most giving the favorable feedback in their healthcare experience.

X. SUMMARY

The current research titled "Patient Satisfaction in Selected Government Hospitals of Uttarakhand: A Study Based on Patient Perceptions" aimed to assess the level of patient satisfaction concerning the healthcare services offered in selected government hospitals within the Garhwal region of Uttarakhand. Patient satisfaction is regarded as a crucial metric of healthcare quality, as it mirrors patients' perceptions, experiences, and expectations regarding hospital services. In developing areas, particularly within government healthcare facilities, patient satisfaction is vital for assessing the effectiveness and efficiency of healthcare delivery systems. The research concentrated on understanding patients' perceptions of various facets of healthcare services, including the behavior of doctors, support from nursing staff, cleanliness and hygiene, waiting times, availability of medications, diagnostic services, infrastructure, and the overall treatment experience. This descriptive study primarily relied on primary data gathered from 236 respondents through a structured questionnaire employing a five-point Likert scale. The respondents were chosen from various districts in the Garhwal region, such as Dehradun, Haridwar, Pauri Garhwal, Tehri Garhwal, Chamoli, Rudrapur, and Uttarkashi. Convenience sampling was employed for respondent selection, and both primary and secondary data sources were utilized. Primary data was directly collected from patients visiting the selected government hospitals, while secondary data was sourced from books, journals, research papers, government reports, and online resources related to healthcare services and patient satisfaction. The gathered data was analyzed using percentage analysis and Pearson Correlation Analysis to explore the relationship between the quality of healthcare services and patient satisfaction. The study's findings indicated that the majority of patients expressed general satisfaction with the healthcare services provided in government hospitals. The results of the study indicated that the majority of patients expressed a general satisfaction with the healthcare services offered in government hospitals. Respondents valued the conduct and communication abilities of both doctors and nursing staff, the promptness of medical attention, and the cost-effectiveness of healthcare services. Numerous patients conveyed favorable views regarding the commitment and supportive demeanor of healthcare professionals. Nevertheless, the study also uncovered various areas of discontent, including overcrowding, extended waiting times, insufficient infrastructure, limited seating options, sporadic shortages of medications, and cleanliness issues in certain hospitals. The hypothesis testing conducted through Pearson Correlation Analysis revealed a very strong positive correlation between the quality of healthcare services and patient satisfaction, with a correlation coefficient of 0.967 and a p-value below 0.05. Consequently, the null hypothesis was dismissed, and the alternative hypothesis was accepted. This validated that the quality of healthcare services has a significant impact on patient satisfaction in selected government hospitals in Uttarakhand. The study concluded that enhancements in healthcare infrastructure, hospital management, cleanliness, availability of medications, diagnostic services, and a reduction in waiting times could substantially improve patient satisfaction levels. It also highlighted the significance of patient-centered care, effective communication, and ongoing assessment of healthcare services to bolster public confidence in government hospitals. The study's findings may assist healthcare administrators and policymakers in formulating effective strategies to enhance the quality and accessibility of public healthcare services in Uttarakhand.

XI. CITATIONS

Clery, P. D., & McNeil, B. J. (1988). *Patient satisfaction as an indicator of quality care. Inquiry, 25(1), 25–36.*

Gadag, R. J., & Iti, J. (2023). *A study on patient satisfaction in a government teaching hospital. National Journal of Community Medicine, 14(3), 145–150.*

Hekkert, K. D., Cihangir, S., Kleefstra, S. M., van den Berg, B., & Kool, R. B. (2009). *Patient satisfaction revisited: A multilevel approach. Social Science & Medicine, 69(1), 68–75.*

Kumari, R., Idris, M. Z., Bhushan, V., Khanna, A., Agarwal, M., & Singh, S. K. (2009). *Study on patient satisfaction in*

the government allopathic health facilities of Lucknow district, India. Indian Journal of Community Medicine, 34(1), 35–42.

Liu, Y., & Wang, G. (2013). Inpatient satisfaction with nursing care and factors influencing patient satisfaction in a teaching hospital. Journal of Nursing Management, 21(1), 70–78.

Malik, S., Sharma, R., & Negi, P. (2024). Service quality and patient satisfaction in public and private hospitals of Uttarakhand. International Journal of Healthcare Management, 11(2), 102–110.

Prakash, B. (2010). Patient satisfaction. Journal of Cutaneous and Aesthetic Surgery, 3(3), 151–155.

Semwal, V., & Singh, A. K. (2018). Patient satisfaction in healthcare services in hilly regions of Uttarakhand. International Journal of Community Medicine and Public Health, 5(6), 2456–2462.

Ware, J. E., Snyder, M. K., Wright, W. R., & Davies, A. R. (1983). Defining and measuring patient satisfaction with medical care. Evaluation and Program Planning, 6(3–4), 247–263.

Zeithaml, V. A., Berry, L. L., & Parasuraman, A. (1996). The behavioral consequences of service quality. Journal of Marketing, 60(2), 31–46.

XII. APPENDIX (QUESTIONNAIRE)

Questionnaire

Patient Satisfaction in Selected Government Hospitals of Uttarakhand: A Study Based on Patient Perceptions

Respondent Information

(Please tick ✓ the appropriate option)

1. Gender

Male

Female

Other

2. Age Group

Below 20 years

21–30 years

31–40 years

41–50 years

Above 50 years

3. Educational Qualification

Illiterate

School Level

Graduate

Postgraduate

Other

4. Occupation

Student

Government Employee

Private Employee

Business

Farmer

Other

5. Area of Residence

Rural

Urban

6. Name of Hospital: _____

Patient Satisfaction Questions

Rating Scale:

1 = Strongly Disagree

2 = Disagree

3 = Neutral

4 = Agree

5 = Strongly Agree

S. No.	Statement	1	2	3	4	5
1	Doctors listen carefully to patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2	The behavior of doctors is satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3	Nursing staff behave politely with patients.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4	Hospital staff provide proper guidance and support.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5	Waiting time for treatment is reasonable.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6	Medicines are available in the hospital.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7	Diagnostic services are satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8	The hospital premises are clean and hygienic.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
9	Seating and drinking water facilities are adequate.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
10	Hospital infrastructure is satisfactory.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
11	Patients receive timely medical attention.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
12	The overall quality of healthcare services is good.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
13	I am satisfied with the treatment received in this hospital.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
14	I would recommend this hospital to others.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
15	Overall, I am satisfied with this government hospital.	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Copyright & License:

© Authors retain the copyright of this article. This work is published under the Creative Commons Attribution 4.0 International License (CC BY 4.0), permitting unrestricted use, distribution, and reproduction in any medium, provided the original work is properly cited.