

## Original Research Article

# An Empirical Research on Perception and Overall Satisfaction of Patients Towards Flower of Services

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## Abstract

This research area is to measure the dimensions of flower of services that affect the patients' satisfaction in the hospitals. A systematic questionnaire was used to collect quantitative data for survey method. **Objective:** The purpose of the study is an attempt to assess the level of satisfaction from the perspective of different dimensions. **Materials and Methods:** The study was conducted in several renowned secondary level hospitals in Laksham Upazilla, Cumilla, Bangladesh. A questionnaire was designed based on 42 items based on the outcome-based literature review. SPSS is used to measure the result. **Results:** Consultation; one of the vital dimensions have great influence on patient satisfaction. **Conclusions:** The current study is specifically useful for the assessment of the health care system in tertiary areas of Bangladesh. The purpose of the study is an attempt to assess the perception and overall satisfaction of patients towards flower of services. The findings of the survey will be helpful for doctors and nurses to upgrade the level of satisfaction in hospitals.

**Keywords:** Patient satisfaction; Flower of services; Dimensions of Health Service Quality.

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## INTRODUCTION

The system of hospital is not sufficiently organized in rural areas in Bangladesh. They often can't be able to provide healthcare facilities like urban areas. Government are concerned to improve the healthcare system and the local people try to set up many self-funded hospitals in rural areas that provide better treatment for rural citizens. But the hospitals are often low funded, understaffed and overly crowded due to a limited number of specialized treatments. So, to improve the quality of health care, the concept "Flower of Services" presents the facilitating services and enhancing services which is designed by Lovelock & Wirtz (2011). This study shows empirical research on perception and overall satisfaction of patients towards flower of services. The respondents are picked from the hospitals in Laskahm Upazilla, Cumilla, Bangladesh.

patient satisfaction. These measurement approaches assessed the level of satisfaction among patients regarding service quality or determined the patient's perceptions regarding how well the service had been performed.

Choi, Lee, and Kim (2005) used a four-factor model to study the quality of services in hospitals which was different from dimensions of SERVQUAL, these four dimensions were Tangibles, staff concern, doctor's concern and convenience of care process. This study was conducted in Korea. In India, several studies have proposed various service quality dimensions like, nursing care, infrastructure, discharge process, support services, environment, administrative processes and corporate social responsibility, (Aagja & Garg, 2010; D'Souza & Sequeira, 2012).

Eleuch (2011) used functional and technical quality parameters to assess the quality of services in Japan. Various researchers from various countries have used the dimensions according to the needs, wants and perceptions of the patients and businesses in those

## LITERATURE REVIEW

### Dimensions of Health Service Quality

In the past, researchers used to focus on measuring healthcare quality and the determinants of

specific populations Health service quality is a construct which is multidimensional. There has been a considerable overlap in the literature review of healthcare service quality and marketing literature, in both the literatures personal. Technical, environmental, administrative and functional dimensions have been found to be important dimensions. The intangible dimensions are of more importance in comparison to the tangible dimensions in case of healthcare service quality.

### Patients Satisfaction

Patient satisfaction it is a subjective evaluation of the patients' cognitive and emotional reactions that interact between their expectations and perception of actual care received.

Donabedian (1988) suggested that 'patient satisfaction may be considered to be one of the desired outcomes of care- information about patient satisfaction should be as indispensable to assessments of quality as to the design and management of health care systems. It can be said as a judgment that a health care gives service gives a pleasurable level of consumption-related fulfilment also it is the overall level of contentment with a service/product experience.

Customers or clients of hospitals and clinics have the most direct experiences with the services provided by these institutions. On a complex issue like health care, while some feel that the customer cannot really be considered a good judge of quality and dismiss their views as too subjective, Petersen (1988) suggests that, 'It really does not matter if the patient is right or wrong. What counts is how the patients felt even though the caregiver's perception of reality may be quite different.' The unique experiences of hospitals' 'guests' thus need to be examined because the quality of these experiences is often related to these clients' emotions, which can be intensified by illness, fear and other factors (Paraschivescu *et al.*, 2011; Severt *et al.*, 2008).

However, the quality-of-service delivery is considered as an essential factor in promising general patient satisfaction towards hospitals. It has been suggested that physicians and hospital staff (medical or non-medical) all ought to focus on the direction to improve as well as enhance the quality-of-service delivery (Jakobsson & Holmberg, 2012). (Manimay, 2017) proposed that giving powerful training to service providers (including all staff of the hospital, medical or non-medical) on interpersonal skills and realistic communication stimulates. In hospitals, the enhancement of service quality is compulsory for achieving a trustworthy profile for patients.

Service providers can significantly enhance the quality of patients' experiences by expressing positive attitudes. Patients' satisfaction levels are influenced by health professionals' emotional support and in-person interactions. However, the way that each patient gets

pleasure from the same hospital experiences is always different since satisfaction has been shown not to be a universal phenomenon. The hospital staff's perceptions of patient satisfaction thus may or may not correspond to the reality of each situation (Hartwell *et al.*, 2006).

### Flower of Services

According to Flower of Service concept the interaction between supplementary services existing in the form of facilitating services and enhancing services within the core product. The concept presents the facilitating services and enhancing services within the scope of their interaction to complete service marketing goals by Lovelock & Wirtz (2011). Supplementary services can be classified into eight clusters in two categories which include:

#### a) Facilitating services:

- ✓ **Information:** New customers and prospects are especially information hungry. Customers' needs may include directions to the site where the product is sold, the service hours, prices of different treatments, conditions of taking those services, warnings of changes and its notifications, confirmations of reservation, summary of account activity, receipts, tickets and its documentations.
- ✓ **Order taking:** Customer may want to be informed about what may be available and secure commitment to delivery. It is important to make the process smooth and fast. It should be polite, accurate and fast to enable customer and endure unnecessary physical or mental effort and not to waste time.
- ✓ **Billing:** Billing is common to almost all services, unless the service is provided free of charge. Inaccurate, illegible, or incomplete bills risk disappointing customers who may, up to the point, have been quite dissatisfied with their experience. The simplest approach is self-billing, when the customer tallies up the amount of an order and either encloses a check or signs a credit card payment authorization.
- ✓ **Payment:** Customers can pay more cheerfully and faster if a company makes transaction more convenient and simpler for them. Examples can be included automation deduction, direct to payee or self-service payment, insert card, and so on.

#### b) Enhancing Services:

- ✓ **Consultation:** At the beginning of a consultation, a patient arrives with ideas, concerns and expectations which they expect to be discussed and understood by the practitioner. Effective consultation requires an understanding of each customer's current situation before suggesting a suitable cause of action.
- ✓ **Hospitality:** In health sector, hospitality means how politely or comfortably they have welcome and counsel patient. Hospital must have some hospitality acquired sector like waiting room with air-condition, canteen service, provide gift package which is not only part of hospitality but also part of conservative treatment.

- ✓ **Safekeeping:** Safekeeping It also means the security and safety which is given by an institution. In this kind of health care institution many people come and treat here. Security is not only institutional responsibility but also patient and patient's attendant responsibility. Security depends on restriction of any types of offensive or attacking situation. Safekeeping services involve physical products that customers buy or rent: parking, packaging, pickup, and delivery, assembly, installation, cleaning, and inspection.
- ✓ **Exceptions:** Exceptions are activities which exceeds normal service delivery. It is a flexible approach to exceptions is generally a good idea because it reflects responsiveness to customer needs. On the other hand, having too many exceptions may compromise safety, negatively impact other customers, and overburden employees.

## MATERIALS AND METHODS

A study was conducted in secondary level hospital in Laksham Upazilla. The questionnaire contained questions on 42 items that measure eight dimensions- information, appointment, hospitality, consultation, safekeeping, exceptions, billing and payment. The questionnaire consisted of five-point Likert scale items. Responses to the variables in the

questionnaires were assigned a score of 1 for 'strongly disagree', 2 for 'disagree', 3 for 'neutral', 4 for 'agree' and 5 for 'strongly agree'.

**Sample:** Permission from the administrative office and the manager was obtained before the survey was carried out in the hospital. verbal consent was taken from all the participants before the start of the interview.

**Analysis:** The surveyed questionnaires were collected and coded in the MS Excel database and analyzed using SPSS version 20. The satisfaction score was expressed as the mean and standard deviation for overall satisfaction with the health services.

## RESULTS

Table 1, 2 and figure 1 shows the perception and overall satisfaction towards 8(eight) service quality dimensions. Dimensions are ranked according to the highest to the lowest mean and figure shows according to order.

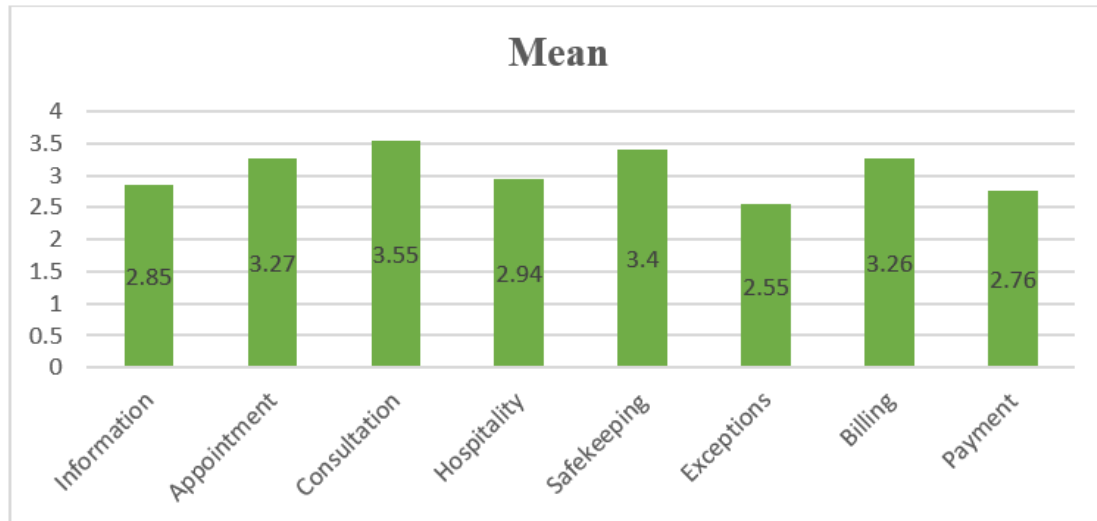
Table 1 shows the 8 dimensions which measure the satisfaction of patients in the private hospitals of Laksham Upazilla. Here, 298 patients are selected in simple random method. The dimensions are ranked by its value of Mean. The following dimensions are:

**Table 1: Perception of patients towards dimensions of satisfaction (Ranking of the Dimensions)**

Dimensions	N	Mean	Std. Deviation	Rank
Information	298	2.85	.900	6
Appointment	298	3.27	.544	3
Consultation	298	3.55	.320	1
Hospitality	298	2.94	.464	7
Safekeeping	298	3.40	.348	2
Exceptions	298	2.55	.321	8
Billing	298	3.26	.666	4
Payment	298	2.76	.464	5

These items have been ranked in order of their contribution to the patient satisfaction on the dimensions according to services. It can be seen that; rank 1 is consultation which is focusing on patient's satisfaction where Mean= 3.55 and S. D=.320. Safekeeping stands on the second position where Mean is 3.40 and S.D=.348. The Mean of the satisfaction on appointment, billing, hospitality, information, payment, and exceptions is 3.27, 3.26, 2.94, 2.85, 2.76, 2.55 respectively. On the other hand, the S.D of the

satisfaction on appointment, billing, hospitality, information, payment, and exceptions is .544, .666, .464, .900, .464, .321 accordingly. In the table it is shown that, the Mean and S.D of overall satisfaction on all the dimensions are 3.07 and .247. From the table it can be stated that, the Mean of consultation has positive attitude and rest of the variables appeared in a neutral attitude as the Means were higher the Mean of scale. The next table will show the overall satisfaction of patients regarding both of the items and dimensions.



**Fig. 1: Perception of patients/customers towards dimensions of satisfaction**

The figure shows the contribution to the patient satisfaction on the dimensions according to services. Figure presents the mean of consultation has positive attitude and rest of the variables appeared in a neutral attitude as the means were higher the mean of scale.

Table 2 shows the overall satisfaction of patients in the private hospitals of Laksham Upazilla. Here, 298 patients are selected in simple random method. The Mean and Standard Deviation are shown in the following table.

**Table 2: Overall satisfaction according to perception of patients**

	N	Mean	Std. Deviation
Overall Satisfaction	298	3.07	.247

The overall satisfaction regarding items and dimensions is measured, here the Mean and S.D. are 3.07 and .247 respectively. In this table, N denotes the total number of samples.

## FINDINGS, RECOMMENDATION AND CONCLUSION

Based on the findings and opinion of the respondents, the following requirements need to be considered by the owner and stakeholders of the hospitals. So, to satisfy themselves properly by removing dissatisfaction of customers as well as patients, the following steps should be taken as soon as possible. If the perceptions matched properly, it can delight the patients and their attendants from the aspects of all dimensions.

- The hospital should establish information centre for raising the satisfaction level of patients in general.
- The behavior of nurses affects the patients' mind of patients which should be considered by the hospitals.
- The hospitals should focus on special unit facilities for disable patients.
- To privilege the patients, hospitals should maintain secure medical banking system and establish greater customer satisfaction easily.
- Hospitals should have enough doctor and nurses for serving the patients.
- Several hospitals are not concerned and doctor is not available during the appointment time also. So,

authority should less waiting time, maintain exact appointment time and availability of doctors on time.

- Some hospitals have lack of bill clearing system. They should take patients as a part of their billing system.

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