

# CROSSROADS OF ECONOMICS AND PSYCHOLOGY

15-16TH JUNE 2012

## MEASURING THE QUALITY OF HEALTHCARE SERVICES

The diagram illustrates the interconnected nature of different quality measurement frameworks:

- GOALS**: Research model, Value-based, Quantitative, Partial model.
- FUNCTIONAL GAP**: Result of a comparison between expectations and perceptions.
- HBM**: Health Belief Model. Health-related quality depends on:
  - number of treatments.
  - related to treat.
  - following a recommendation would be beneficial.
- vs. TECHNICAL QUALITY**
- ADOPTING...**
- SERVQUAL**
- QUESTIONNAIRE**: Includes sections like "How would you evaluate the service?", "Would you recommend this service to your friends?", and "Order of importance".



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## 15-16TH JUNE 2012

# MEASURING THE QUALITY OF

## HEALTHCARE SERVICES

GOALS

Research model  
Background  
Questionnaire  
Partial results  
  
Functional  
GAP  
result of a comparison between  
expectations and perceptions  
research method

FUNCTIONAL  
QUALITY

vs. TECHNICAL  
HBM  
ADOPTING  
SERVQUAL

Health-Belief Model  
health-related action depends on:  
• motivation/concern  
• perceived threat  
• following a recommendation would be beneficial.

OUTLOOK  
ADOPTING...

QUESTIONNAIRE



NEW  
SZÉCHENyi PLAN



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# GOALS

Research  
Background  
Questions  
Partial results

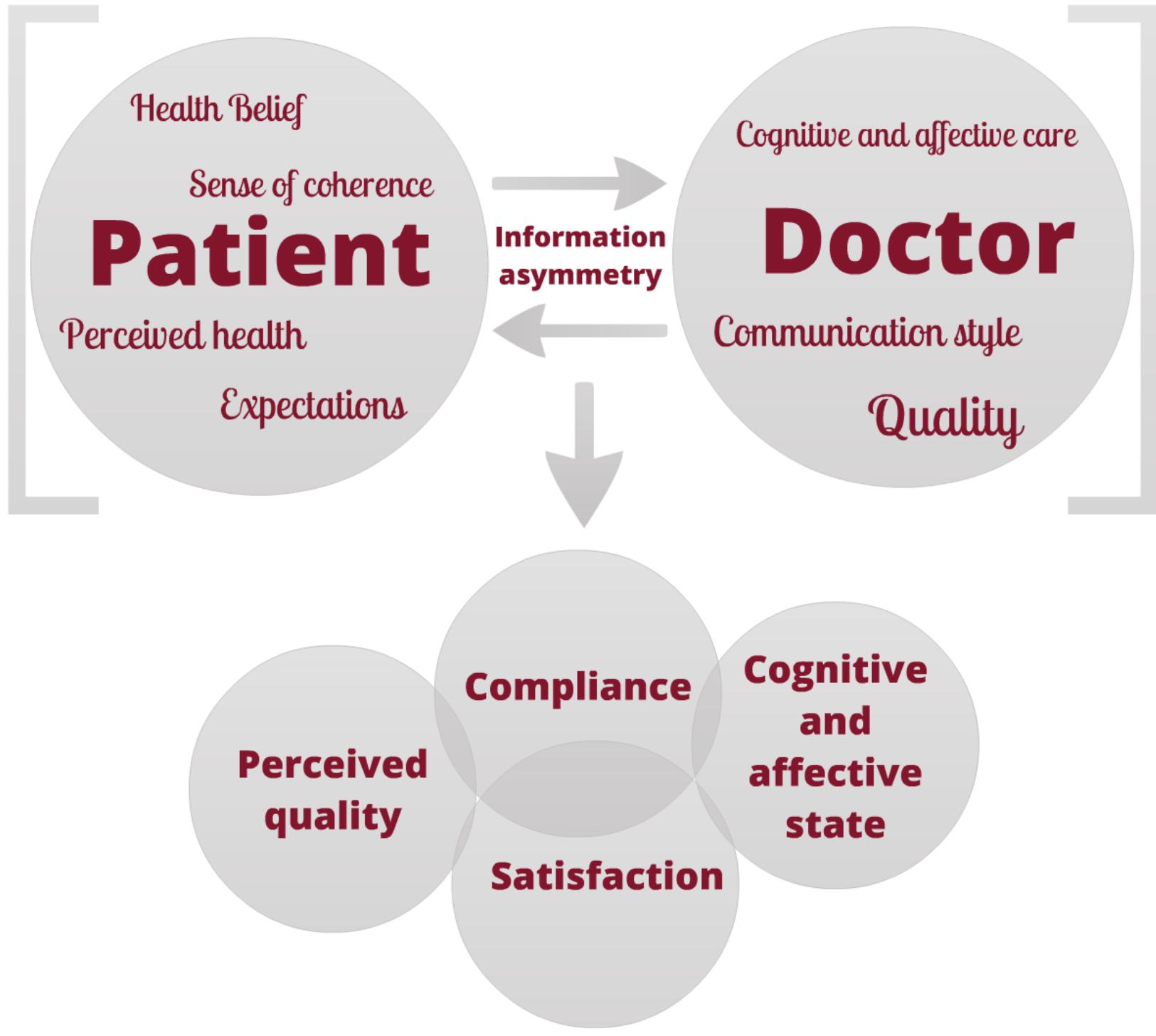


Research model

Background

Questionnaire

Partial results



# ESSENCE

# HBM

# ADOPTING

- Babakus & Mangold, 1991
- hospital services
  - discarding items and mixed statements
  - 5-point Likert scale
  - factor analysis
  - it is reliable and valid
  - unidimensional measure of expectation and perception



Health Belief Model  
health-related action depends on:

- motivation/concern
- perceived threat
- following a recommendation would be beneficial

ADOPTION

QUESTI

ends on:

# ADOPTING...

ndation would be beneficial

- perceived susceptibility
- perceives severity
- perceived benefits
- perceived barriers
- motivators
- self-efficacy

Chen et al.2010; Saito et al.2010;  
Ngai et al.2005; Simon 2000

# IFSTI

- perceived susceptibility
- perceives severity
- perceived benefits
- perceived barriers
- motivators
- self-efficacy

(Buglar et al 2010, Gutierrez-Long 2011,  
Nejad et al 2005, Simon 2010)

# HEALTHCARE

Research model  
Background  
Questionnaire  
Partial results

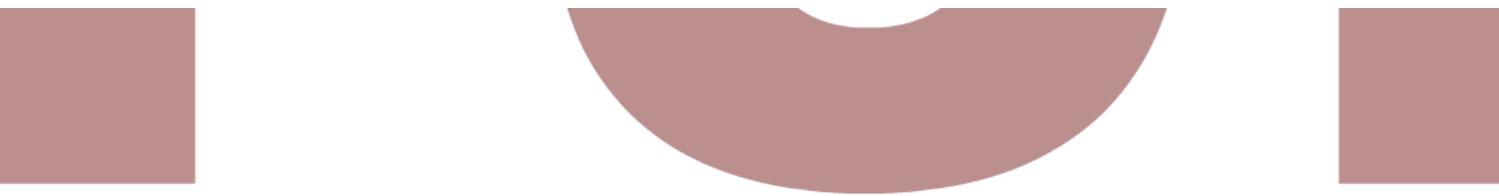


# FUNCTIONAL GAP

result of a comparison between  
expectations and perceptions  
(Parasuraman, Zeltham and Berry 1988)

# vs. TECHNICAL QUALITY

# A SERVQ



# GAP

*result of a comparison between  
expectations and perceptions*

(Parasuraman, Zeithaml and Berry 1988)

# NATIONAL SERVICE vs. TECHNICAL QUALITY ADOPTING SERVQUAL

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Dr. Ágata Vaz de Brito

- Tangibles
- Reliability
- Responsiveness
- Assurance
- Empathy

PERIODICAL

# ADOPTING QUALITY

Babakus & Mangold, 1991

- hospital services
- discarding items and mixed statements
- 5-point Likert scale
- factor analysis
- it is reliable and valid
- unidimensional measure of expectation and perception



Healthqual (Miranda et al 2009)

- adopted to primary care
- users and managers (gap6)
- discarding mixed statements
- significant modification of items
  - health staff, no health staff, efficiency, facilities
- explain satisfaction

- Tangibles
- Reliability
- Responsiveness
- Assurance
- Empathy

## Babakus & Mangold, 1991

- hospital services
- discarding items and mixed statements
- 5-point Likert scale
- factor analysis
- it is reliable and valid
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## Healthqual (Miranda et al 2009)

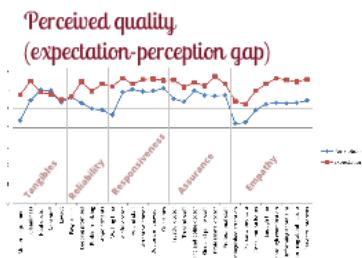
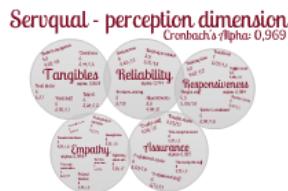
- adopted to primary care
- users and managers (gap6)
- discarding mixed statements
- significant modification of items
  - health staff, no health staff, efficiency, facilities
- explain satisfaction



belief Model  
related action depends on:  
ation/concern  
wed threat  
ing a recommendation would be beneficial

# QUESTIONNAIRE

- habits
- SDC13
- adapted HBM
- credibility and effective care of GP
- preferred and perceived communication styles
- adapted SERVQUAL (29 items, 7-point Likert scale)
- demography
- so far, N= only 32

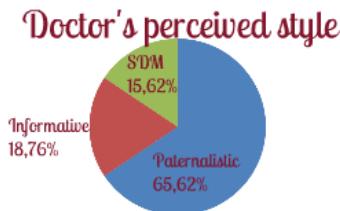


- Gathering respondents
- Case-study?
- Testing scales
- Statistical analysis
- Connections between SDC13, HBM, SERVQUAL, communication and compliance

## OUTLOOK

Crosstab: satisfaction and doctor's style

Level of overall satisfaction	Perceived style of doctor			Total
	Informative	Paternalistic	Shared decision	
Not at all	0	1	0	1
Mainly not	0	0	0	0
Rather not	0	3	0	3
So-so	3	2	0	5
Rather	0	6	0	6
Mainly	0	5	1	6
Totally	3	4	4	11
Total	6	21	5	32



- habits
- SOC-13
- adopted HBM
- cognitive and affective care of GP
- preferred and perceived communication styles
- adopted SERVQUAL(29 items, 7-point Likert scale)
- demography
- so far, N= only 32!

# Servqual - perception dimension

Cronbach's Alpha: 0,969



*Modern equipment*

4,5

4,38/1,8

# Tangibles

alpha: 0,869

*Neat doctor*

6

6/1,1

*Neat staff*

6

5,97/1,1

*Cleanliness*

6

5,44/1,6

*Layout*

6

5,34/1,5

*Disting...*

# Reliability

alpha: 0,744

Problem solving

5

5/1,9

Easy access

6

5,63/1,5

Keeping promises

5,5

5,31/1,8

Appointments

5,5

4,94/2

Trustful

Waiting

5,5

4,69

Res

Helpful sta

6,5

6,03/1,3

ness

,6

es

0,869

out

+1,5

Distin...

# Responsiveness

alpha: 0,924

Attentive doctor  
6  
5,91/1,2

Doctor's endeavor

6

5,94/1,3

Questions  
7  
6,09/1,2

Helpful doctor  
6,5  
5,88/1,4

Waiting time  
5,5  
4,69/2,2

Helpful staff

6,5

6,03/1,3

Trustful doctor  
5,53/1,7

# Assurance

alpha: 0,927

Trustful doctor  
5,53/1,7

Kind and polite doctor  
6  
5,97/1,3

Trustful staff  
5,38/1,5

Professional doctor  
6  
5,69/1,6

Kind and polite staff  
6  
5,72/1,5

Professional staff  
6  
5,72/1,1

# Empathy

alpha: 0,948

Thorough  
examination  
6  
5,31/1,7

Personalized care  
4  
4,28/2,1

Patients'  
interests  
6  
5,44/1,5

Distinguished  
attention  
4  
4,22/2

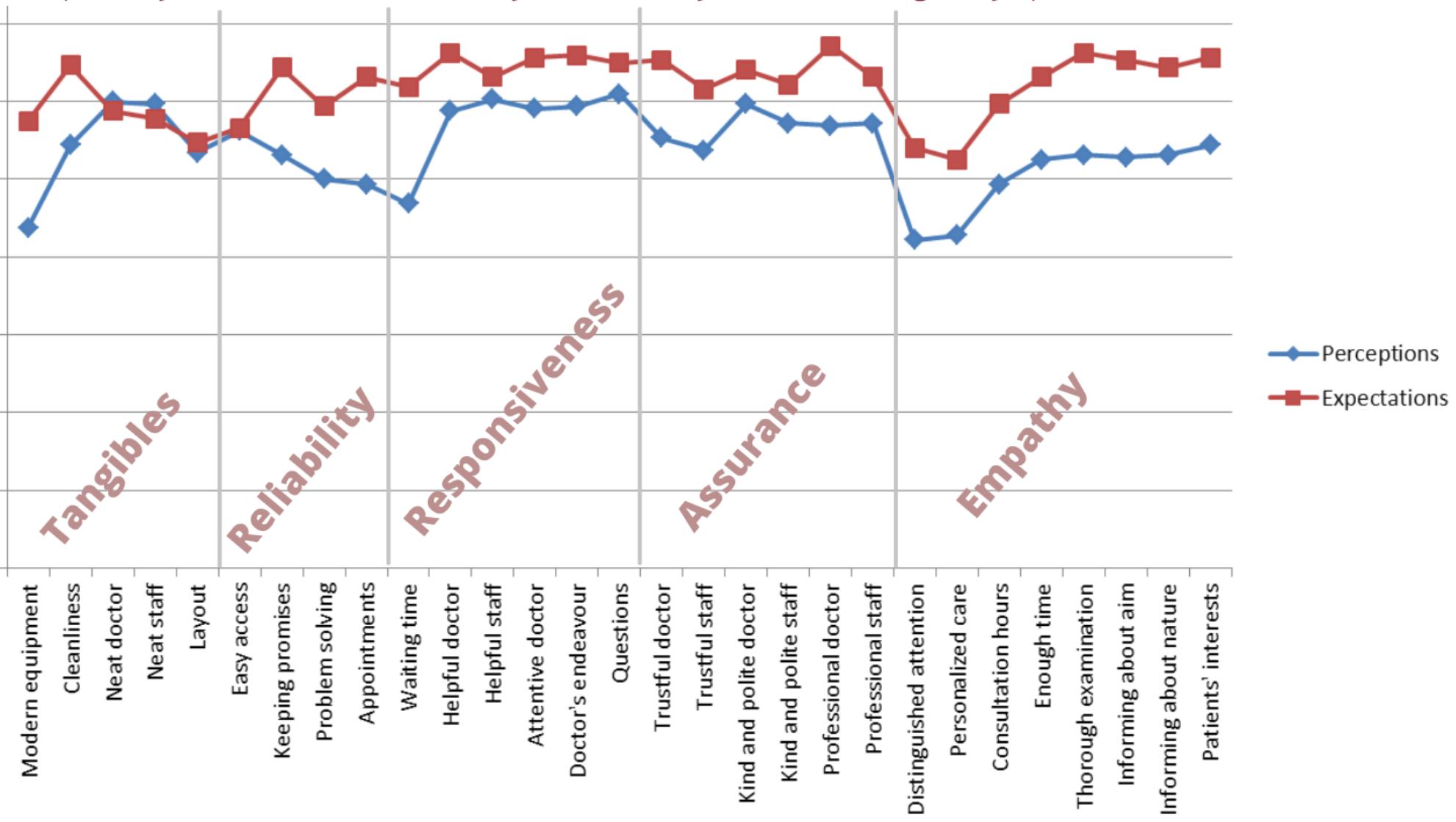
Enough time  
6  
5,25/1,9

Informing  
about nature  
6  
5,31/1,8

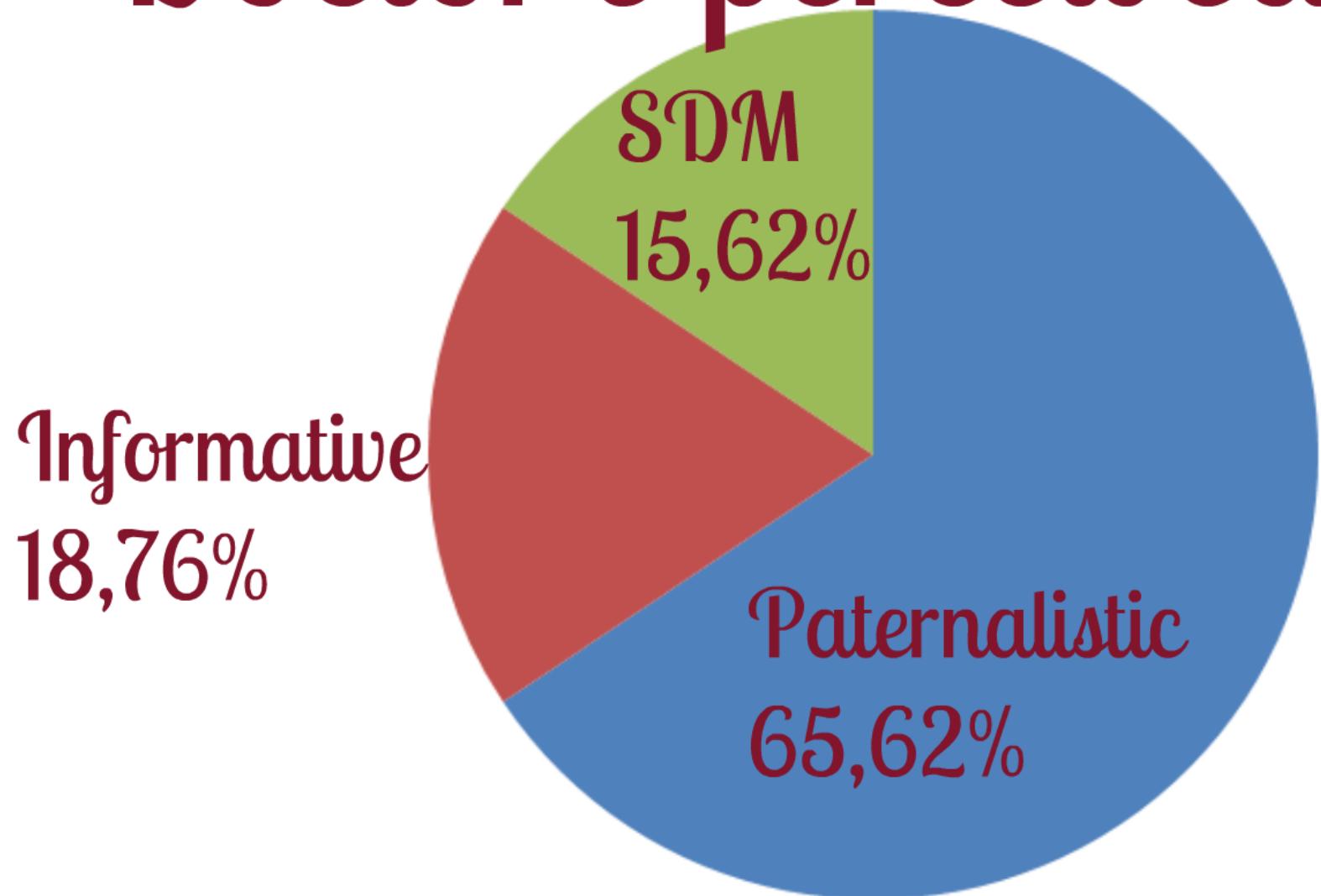
Informing  
about aim  
6  
5,28/1,7

Tr  
5  
•  
Profes  
6  
5,69/1,

# Perceived quality (expectation-perception gap)



# Doctor's perceived style



# Crosstab: satisfaction and doctor's style

Level of overall satisfaction	Perceived style of doctor			Total
	Informative	Paternalistic	Shared decision	
<b>Not at all</b>	0	1	0	1
<b>Mainly not</b>	0	0	0	0
<b>Rather not</b>	0	3	0	3
<b>So-so</b>	3	2	0	5
<b>Rather</b>	0	6	0	6
<b>Mainly</b>	0	5	1	6
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<b>Total</b>	6	21	5	32

- Gathering respondents
- Case-study?
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# OUTLOOK

Crosstab: satisfaction and doctor's style

- perceived susceptibility
- perceives severity
- perceived benefits
- perceived barriers
- motivators

Level of overall satisfaction	Perceived style of doctor			Total
	Informative	Paternalistic	Shared decision	



**compliance**

**now**

Thank you for your attention!