

**Patient Satisfaction with Health Care Services in Tertiary Hospitals: A Comparison of Government and Private Hospitals of Abbottabad, KPK**Tehreem Shehzad^{1*}, Saima Manzoor¹, Waniya Idrees¹, Umaima Mamoon¹, Syeda Khola¹, Asya Tauqir¹¹Women Medical College, Abbottabad**Received date:** 01-12-2025**Publication date:** 24-12-2025**Abstract**

In a healthcare system patients are the main users of facilities and their satisfaction with these facilities is very important factor that tells how effectively the care is being provided. Patient satisfaction is now considered an important indicator of hospital performance. For any hospital to perform well, it must understand what patients' expectations from a healthcare system are and how they perceive quality care. Also, continuous and regular evaluation of patient satisfaction can positively affect the patient's interaction with the healthcare system and their trust in the institution. The objective to assess patient experiences in tertiary healthcare settings, such as staff attitudes, communication, accessibility, waiting times, and general quality of care. To see differences in patient satisfaction level in government and private hospitals. Therefore, this study aims to assess patient experiences in tertiary healthcare settings, such as staff attitudes, communication, accessibility, waiting times, and general quality of care and to see differences in patient satisfaction level in government and private hospitals. Cross-sectional study was carried out over eight months (March–October 2024). A non-probability convenience sampling method was used. Based on the WHO calculator, the required sample size at a 95% confidence interval was 258. Of these, 129 participants were taken from government hospitals and 129 from private hospitals in Abbottabad. All the patients present in mentioned tertiary care setting admitted in the wards and visiting OPDs of tertiary care hospital. Patients who were not interested were excluded. Data were processed and analyzed using SPSS version 20. The survey of 258 participants revealed mostly female 131(50.8%) with an average age of 38.5 years. 96% of private and 82% of public hospital patients appreciated the calm environment. Affordability of medications was acknowledged by 61% of private and 51% of public patients. Positive interactions with staff were reported by 97% of private and 88% of public hospital patients. Additionally, 89% of private and 80% of public patients found waiting times reasonable. Our study shows that there is significant difference in patient satisfaction level between public and private sector hospitals. As far as provision of facilities like clean environment, bathroom facilities, treatment affordability, attitude of doctors and nurses/paramedics and waiting time are concerned patient showed more satisfaction with the facilities provided in private hospital than those provided in public Hospitals as they were much better in private sectors as compared to public hospitals.

Keywords Patient satisfaction, Tertiary care hospital, public and private hospitals**1. Introduction**

Patient satisfaction is widely recognized as an important indicator of healthcare quality because it reflects the patient's overall experience with hospital services (1). According to the World Health Organization, satisfaction includes responsiveness, reliability, and the extent to which healthcare providers meet patient expectations (1).

The experiences reported by the patients become an important factor with the evaluation of healthcare systems and play a major role in evaluating hospital performance (2). The evaluation of hospitals and healthcare quality was largely based on the clinical outcomes and professional standards for the past many

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years, but today modern healthcare is beginning to rely on how patients are perceiving the care (3). This can help positively influencing trust of the patients in healthcare and can improve service utilization and compliance with treatment. High quality service delivery is a main component of any effective healthcare system and especially in Pakistan, where healthcare delivery is structured into primary, secondary, and tertiary levels, understanding patient needs is essential for improving service quality and ensuring effective care. (4). When it comes to high-quality healthcare delivery, another very important role being played by patient satisfaction is adherence to the treatment by patients and overall recovery. This can help provide proper guidance and support to patients particularly in sensitive areas such as perioperative care (5). The effect of performance of a healthcare system, patients' personality, previous experiences and expectations on a level of patient satisfaction makes it very important tool for making strategies for improving the services and evaluating the success of healthcare system (6). Patients' satisfaction includes several dimensions like technical quality, the hospital environment, and interpersonal interactions between patients and staff. Each of these tells how willingly patients follow treatment plans and how they perceive the care they receive (7). Outpatient department (OPD) forms the first interaction between the patients and the healthcare system which makes the waiting time, staff attitude, and overall organization of the OPD strongly influence their first impression and their satisfaction (8). Emergency departments also contribute significantly to satisfaction levels. Issues like crowding, long delays, and limited resources affect patients' satisfaction with the service delivery (9). Patient satisfaction is now increasingly being considered a core indicator of healthcare quality by researchers and health authorities in addition to clinical outcomes and quality-of-life measures (10). Patient satisfaction can also be assessed by nursing care. Staffing levels and nurse-patient ratios directly influence how effective care can be provided, making them important contributors to patient satisfaction (11,12). Based on above discussions, patients' satisfaction is not just a patient's personal experience but can reflect the broader efficiency and responsiveness of the healthcare system when assessed thoroughly and can also help in achieving better-quality patient-centered care.

2. Methodology

Cross-sectional study was conducted over eight months, from March to October 2024, involving both admitted

patients and outpatients from public and private hospitals in Abbottabad. A non-probability convenience sampling approach used for participant selection. To measure the patient satisfaction levels, we developed a 24-item questionnaire for this study and refined it to match local hospital conditions. The questionnaire covers several domains, including medication affordability, quality of stay, staff behavior, and waiting times. Responses were recorded on a five-point Likert scale. Mean scores were calculated for each domain. The questionnaire was distributed to 258 individuals in total, with equal representation from government (129) and private (129) hospitals. All the patients were in mentioned tertiary care setting admitted in the wards and visiting OPDs of tertiary care hospitals. Patients who are not interested were excluded. Data analysis was carried out using SPSS version 20. We obtained ethical approval prior to data collection and fully maintained confidentiality of the participants.

3. Results

The survey was conducted in Public and Private Hospitals of Abbottabad to assess patient satisfaction with health care services. Total number of subjects participated in the survey was 258 in which majority were female 131(50.8%) The mean age of all the patients was 38.5 years (std deviation=18.35), the youngest patient being 6 years old while oldest being 100 years old. Majority of the patients were unemployed and housewives. Most of the patients were Uneducated (29.3%).

Majority of patients in our study show satisfaction with the environment of hospital. Especially those in private hospitals were more satisfied as compared to those who were in government hospital. Private hospital patients also reported quiet surroundings, comfort during the stay, prompt staff assistance, and availability of sufficient space for personal belongings more frequently as compared to government ones. The major difference in the response of both groups was in bathroom and sanitation services. 75% of private-hospital patients were satisfied with it compared with only 13% in government hospitals (Table 1) and 60% of patients in both groups of our study found treatment and medicines affordable. But clarity in billing process and transparency of cost of treatment were slightly better in private hospitals as reported by patients. Efforts for cost-effective care by the



hospital were noted by 68–69% in both private and public groups (Table 2).

Table 1: Hospital Environment

	Frequencies (Percentages)		
	Private	Public	Total
Strongly Agree	82(63.5)	19(14.7)	101(39.1)
Agree	42(32.5)	88(68.2)	130(50.4)
Uncertain	2(1.5)	10(7.75)	12(4.7)
Disagree	2(1.5)	9(6.97)	11(4.3)
Strongly Disagree	1(0.77)	3(2.3)	04(1.6)
Total	129	129	258

Table 2: Affordability of treatment

	Frequencies (Percentages)		
	Private	Public	Total
Strongly Agree	41(31.7)	14(10.8)	55(21.3)
Agree	38(29.4)	64(49.6)	102(39.5)
Uncertain	34(26.3)	18(13.9)	52(20.2)
Disagree	12(9.3)	23(17.8)	35(13.8)
Strongly Disagree	4(3.1)	10(7.7)	14(5.4)
Total	129	129	258

In private hospitals higher number of patients were satisfied with the attitude of the staff but in public hospitals satisfaction was less. Patients in public hospitals were also less satisfied when it comes to how well doctors/nurses explain conditions and courteousness of doctors/nurses as compared to private hospitals.

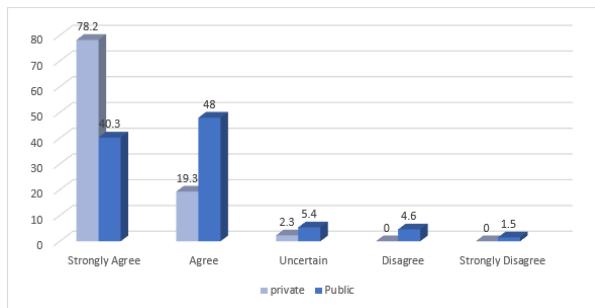


Figure 1: Attitude of Doctors and Nurses

The experience of private hospital patients was also better than public patients with waiting times. Patients in private hospitals reported more comfort, clearer

communication, and greater staff courtesy while public hospitals patients were not satisfied with these factors.

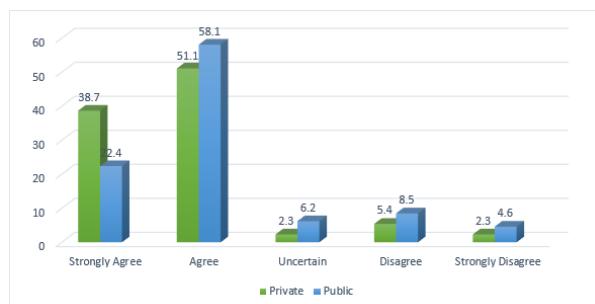


Figure 2: Waiting time

4. Discussion

Comparison between levels of satisfaction of private and public hospital patients was done by our study because patient satisfaction is an important factor in evaluating the progress and the quality of healthcare services. Majority of our study sample was represented by women. This is similar to the observations made by Fatima Kausar *et al.* (13), Nebsu Asamrew *et al.* (3), and Angela Alibrandi *et al.* (14). But this is in contrast with the findings of Obaid Ur Rehman *et al.* (7) and Verma *et al.* (15), where men formed the larger proportion of study participants. The age of most of the patients in our study was between 26 and 50 years, with an average of 38.5 years that does not match with the study of Sinyiza *et al.* (16) and Asamrew *et al.*, where patients were comparatively younger and older respectively, as compared to our patients. The comparison of education and employment status of our study sample with the study of Obaid Ur Rehman *et al.* (7) shows similarities such as greater number of patients in both studies are not educated, unemployed and are housewives but greater number of our participants were graduated in contrast. Studies by Asamrew (3) and Aljarallah (17) noted a greater number of employed individuals which is opposite to findings of this study. Hospital environment is another important domain in this study compared to private and public hospitals. Patients of private hospitals are more satisfied with comfort, hygiene, and bathroom conditions and same is shown by work of Fatima Kausar (13) and Obaid Ur Rehman *et al.* (7) that is further supported by Dr. Yuping Li (18), which also showed greater satisfaction with cleanliness in private hospitals. Patients of public hospitals in our study show dissatisfaction with the hygiene and bathroom conditions

which match with the findings of Rehman (7) and Verma (15). There is also a similar finding between our study and Hassan *et al.* (19) in terms of cost of treatment and clarity in billing process where both sectors show moderate level of satisfaction with private sectors comparatively showing greater satisfaction on charges and billing transparency. This is not supported by the findings of Israr (20) and Rehman (7), where affordability was a concern for both public and private patients. Lower level of patient satisfaction is recorded by Sinyiza (16) regarding the healthcare staff behavior and staff patients' interactions which does not align with our study because our results show higher satisfaction when it comes to the behavior of healthcare staff and patients are satisfied with the attitude of doctors towards them and showed confidence in communication with doctors and healthcare staff. These findings are supported by Asamrew (3) and Rehman (7). Experience of the patients about waiting times is satisfactory which is same as shown by Asamrew (3). Private hospital patients in our study reported better waiting experience supported by the Kaur (21) which also shows comfortable and courteous waiting experience by the private hospital patients. Patients in public hospitals are less satisfied with waiting times, same as shown by Verma (15).

5. Limitations

The small sample size limits the generalizability of this study, and the findings may not apply to other regions or healthcare systems. Patient satisfaction may also be influenced by recall bias, as responses are based on patients' memories of their hospital stay. Additionally, satisfaction is subjective and varies according to individual expectations, cultural background, and personal experiences. Not all factors affecting patient satisfaction, such as prior medical experiences, underlying health conditions, and socioeconomic status, were fully considered. Differences observed between public and private hospitals may reflect institution-specific characteristics rather than broader healthcare trends.

6. Conclusion

The study about level of patients' satisfaction with healthcare facilities in private and public hospitals clearly points out the differences between the two sectors when

it comes to the environment of the hospital, comfort of the patients and clarity in billing processes where private hospitals showed better results than public hospitals. While both reported comparable satisfaction with behavior of healthcare staff and waiting experience. Dissatisfaction shown by public hospital patients in cleanliness and hygiene highlighted the need for progress in this domain by public hospitals as compared to private hospitals.

Conflict of interest The author declares no conflict of interest.

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