Executive Summary

This work, presented in seven units is a small but timely contribution to healthcare service quality aspects. The main theme is on total service quality issues in healthcare sector along with a few supplementary themes. It is a mix of concepts, measurement methods, model building, field studies and an analysis of the PPP model of the Yeshasvini healthcare scheme in Karnataka State (Chapter 6). There is some anecdotal evidence on the success of the scheme, particularly as a health insurance cover. Included is an analysis of responses from 118 beneficiaries in a field survey. After a compact review of relevant literature (Chapter 3), the dissertation unfolds sequentially.

The work gives a macroscopic view of the quality aspects in the Indian healthcare sector, which is more disappointing than encouraging. It gives microscopic view of certain bright spots like the working of the Yeshasvini Scheme in Karnataka State, which is commended for scaling up and replication by other States.

Total Service Quality (TSQ) framework, classification of medical service quality characteristics as positive and negative, a few service quality indices and ratios including a demerit index I; distinguishing between de jure and de facto service quality levels and their assessment form the core part of the work. A hybrid model, combining binary and rated variables, is developed and a quality score is derived therefrom (Chapter 4). The model can be generalized and adapted to the case of specific institutions. A multivariate version is included. A cuboid model for coverage processes is comprehensively developed (Chapters 6).

A wide range of issues is covered. This includes role of PPP models, quality elevating classical methods and results of two National level surveys. The findings of the field studies are very insightful, while the recent medical insurgence of new virus (e.g. Zika virus) and ensuring de facto service quality throw up new challenges to the medical and researchers’ fraternity.

Two field studies based on primary data form the contents of Chapter 5. The first one refers to a firsthand survey of patients/attendants in a charitable hospital near Valasad
in Gujarat, providing Ayurvedic treatment for cancer. The second field study is on patients/attendants in a sample from selected hospitals in Bengaluru and Mangaluru cities providing Allopathic treatment. The findings provide useful insights into the healthcare sector scenario, exposing a spectrum of strong and the weak points.

A PPP model is recommended for its practical efficiency. This model can be emulated on a wider scale in the health sector. The concept of a coverage process is initiated in Chapter 6 and the Yeshasvini scheme is fitted into the same using a geometric cube model. This is generalized into a cuboid model for coverage processes which is mathematically analyzed in Chapter 6. A compact summarizing discussion is in Chapter 7. Further to this, seminal work of Bhat et al (2015 a, b) who have developed a basic technique to create universal, standardized scientific terminology is highlighted, called the root and rule based method. It identifies the root word and minimally builds on it to create a compact, unambiguous and user friendly, as well as computer suited word structure. The scope for further work, mainly as generalization of the models proposed in Chap. 4 & 6 to other fields, building a national database of patients and development of root and rule based standardized medical terminology, form the contents of this final chapter.

As directly related, attention is drawn to some contemporary policy issues in Indian health sector and the usefulness of quality elevation techniques like yoga (Annexure V)

In short, the present thesis travels through some new distance to investigate measurement and evaluation of health service quality along with the issues plaguing the Indian health sector. Some constructive suggestions emerging from discussions with experts and reference to print media are built into the discussion as it proceeds. Necessary supplementary materials are appended.