

Evaluation of Health Service Quality in City Hospitals

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Abstracts

In Turkey, city hospitals play a significant role in the provision of healthcare services. This survey looked at the level of satisfaction with various hospitals. In the study, social media was one of the tools. The hospitals' websites were used to compile satisfaction ratings. After that, content analysis was used to look at the hospitals' indicators for technological, communicative, and physical quality. The study considered hospitals with 1200 beds or greater as a sampling factor in hospital selection. Hospitals are classified with the designation "Hospital" in objectives of information security and ethics. Encoding was carried out like Hos1, Hos2, Hos3, etc. for every hospital. The results of this article, which are considered significant research findings, are believed to have had an important effect on improving hospital service requirements. Additionally, improvements can be made in health service delivery in line with the opinions of stakeholders. Additionally, the importance of patient satisfaction in terms of health tourism was emphasized.

Keywords: A New Trend City Hospital, Service Quality, Health Management, Health Tourism.

Introduction

There was a revolution in the management of healthcare delivery in Turkey in 2003. This reform movement, consisting of 8 main articles, has turned the Turkish Health System into a modern model. One of these reforms is introducing the public-private partnership model in health service delivery. City hospitals are huge hospitals built on this idea. It is known that it provides great benefits to the public in terms of financial risk and financial sustainability. Aiming to provide the highest quality and comfortable healthcare services, City Hospitals have also become pioneers in the field of educational activities. In the Law on Privatization of Health Services, it is defined as "medical activities carried out to eliminate various factors that harm human health and to protect the society from the effects of these factors, to treat patients, and to acclimate those with reduced physical and mental abilities and faculties" [1-16]. The public-private partnership model is a preferred method to provide resources for public services, especially infrastructure investments, where there is long-term risk sharing between the public administration and the private sector [2]. Most developed countries are turning to the private sector as a means of

financing infrastructure development through Public-Private Partnerships (PPPs) [2]. In Turkey, the model is operated as follows; City hospitals, which are a hospital operating model in which the Ministry of Health is a tenant, are established by companies on Treasury lands allocated to companies free of charge. The Ministry of Health will pay rent to companies for at least 25 years. In addition to being a tenant, the Ministry of Health also purchases services from the company that builds the City Hospital. Companies (or contractor firms/firms) operate all commercial enterprises in and around the hospital and receive payment from the Ministry of Health. [3]. This study focuses on the public-private collaboration concept known as the city hospitals paradigm.

For a project in a public-private partnership to be finished on schedule and with excellent quality, private-sector funding and technical know-how are essential. Public-private partnerships are frequently employed to supply the infrastructure or services that the public needs at lower costs. Incorporating public-private partnerships may entail some risks. The largest risk is that the private sector prioritizes making money while offering health services. The public also acts as a control and coordination entity in the public-private partnership paradigm [4].

Opinions and recommendations from stakeholders are valuable in quality management.

A successful quality management system must take into consideration the expectations and recommendations of its stakeholders. It is necessary to strike a balance between the varying expectations of patients and their families and to create a quality management system with objective features [5].

This study will employ Avedis Donabedian's (1988) structure-process-result paradigm as its evaluation technique. Donabedian highlights that evaluating healthcare quality is the same as evaluating medical care standards. Donabedian claims that when delivering health services, the structure-process-result model considers three factors: technical quality (the ability of health providers), communication quality, and physical quality [6][7].

When all these situations are evaluated, this model is thought to be an exemplary model that is contemporary, sustainable, effective, facilitates access to healthcare, and provides comprehensive healthcare services.

Healthcare quality dimensions, adapted from Quality of Care [8-9-10].

The Effective, Healthcare that is evidence-based and results in improved healthcare outcomes for individuals and communities tailored to their needs. In short, it measures achieving planned goals in health care.

The Efficient, healthcare that maximizes resource use and avoids waste, it is the ability to do things right.

Healthcare that is accessible, timely, geographically reasonable, and provided in an environment where skills and resources appropriate to medical needs are available, this dimension, also known as timeliness, is the provision of diagnosis, treatment, and care services within the most appropriate and acceptable time interval according to the patient's needs.

Acceptable healthcare, healthcare that takes into account the preferences and aspirations of individual service users and the cultures of their communities, involves precautions and

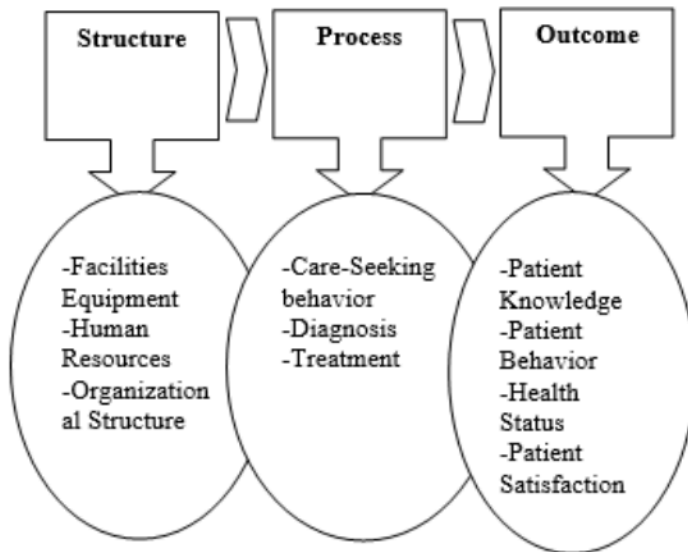
improvement activities that can be taken to keep all foreseeable dangers that may cause harm to all stakeholders receiving services at an acceptable risk level.

The equitable healthcare, dimension is the provision of equitable healthcare without any discrimination due to personal characteristics such as gender, race, ethnicity, geographic location, or socioeconomic status or It is to ensure that service recipients benefit from equal rights based on their treatment and care needs, without any other discrimination, in all service units of the institution.

Safe health care; that minimizes risks and harm to service users.

When it comes to the Donabedian model in health services, this model, invented by Donabedian, expresses the patient's well-being to be maximized comprehensively after a balanced process management of the service process in all processes of health services [10].

Figure I The Donabedian Model



Donabedian (1988) evaluated quality in health services by considering structure, process and output quality. Donabedian's definition of structure is as follows; It includes the service building of the institution where the health service is provided, the health technology it uses, financial resources, the characteristics of human resources and the intellectual capital of the business.

Process, on the other hand, expresses how the inputs or resources required for production are used and what kind of service is produced.

Examples of processes include administrative factors such as diagnosis, implementation of health care treatment, payment systems, and source of financing.

The result dimension is also defined as this output. It includes the effects arising from the provision of health services such as healthy life expectancy, mortality rates, recovery rates, and the number of children vaccinated.

One of the aims of this study can be said to reveal the importance of quality studies in health enterprises. If all processes are managed according to predetermined and generally valid standards in the provision of health services, the following benefits can be gained;

- customer satisfaction increases
- error rate in provided health services decreases
- employee health and safety is ensured
- time is saved
- zero error focused health services are provided
- financial resources are not damaged
- international recognition is achieved
- health tourism studies are accelerated,

Among these benefits, we should focus on health tourism;

Due to the globalization of health services, health tourism is one of the most promising sectors in the tourism industry Health tourism can also be defined as purchasing health services from abroad to purchase medical or health services [11].

One of the most important points in health tourism is as follows; It increases the sense of trust that the health tourist will have in the country before receiving health services, while receiving health services and after receiving health services. Increasing the sense of trust in the country will increase the re-travel to the country to receive health services. In addition, sharing this sense of trust with the people around will also affect the travel intention of other people [12].

Therefore, if you increase the quality of healthcare services in the country, your preference for foreign patients will increase. Huge mega structures such as city hospitals will enable you to become a star in the healthcare market. In this study, the evaluation of city hospitals, which are very important in terms of health tourism, was made in terms of health service quality. The evaluation was made based on the Donabedian Model. The web sites of the hospitals included in the sample were visited and the scores they received were evaluated. In addition, the comments made for the hospitals were categorized based on the Donebieran quality model and evaluated in three groups. This evaluation was made based on the structure-process-result or output dimensions, as explained in the literature of the research. In addition, the preferability of the quality applications of the hospitals in terms of health tourism was evaluated.

METHOD OF RESEARCH

This research is important research conducted to measure the quality of healthcare services in giant healthcare facilities with over 1000 beds. Secondary data shared with the public was used in the research. In this respect, it complies with ethical principles. The population of the research according to the Ministry of Health website data; consists of 18 city hospitals. 5 of these mega hospitals were not included in the study because they had fewer than 1200 beds. The population of the research consists of 12 Mega City hospitals. Hospital websites were used as the data collection method in the research. By analyzing patient evaluations on websites, scores for hospitals were determined in three dimensions. These three dimensions; are “physical quality”, “technical quality” and “communication quality” dimensions. In addition, the total satisfaction scores of the hospitals are also given. Hospitals are named using the coding technique 1-13. It is as follows; Hos1-Hos13.

FINDINGS OF THE RESEARCH

In this section, primarily the technical characteristics of the hospitals included in the research will be discussed. Although the data used in the article is entirely secondary, it is ethically appropriate. First, hospitals will be introduced. These mega hospitals have a huge number of beds. Here, the number of beds, total number of outpatient clinics, number of operating rooms, and number of intensive care units will be given. This situation is shown in Table I below.

Table I Mega Hospitals Technical Specifications

Hospitals	Num. of Beds	Num. of Polyclinics	Num. of Operating Rooms	Num. of Intensive Care Beds
Hos1	1330	276	51	263
Hos2	1595	330	60	259
Hos3	4050	904	131	997
Hos4	4050	1031	125	666
Hos5	1355	403	49	294
Hos6	1235	256	37	198
Hos7	1875	335	64	259
Hos8	2060	337	54	374
Hos9	1607	404	43	320
Hos10	1218	218	63	188
Hos11	1250	384	49	289
Hos12	2682	710	90	423
Total	24307	5588	816	4530

In Table I, it is possible to see mega hospitals with almost as many beds as the number of beds in a developing country. City hospitals in Turkey were created by combining several small and medium-sized hospitals. The first city hospital was opened in 2017. They continue their activities within the scope of public-private partnerships.

Table II Like Rates of Turkish Mega Hospitals

Hospitals	Total Num. of comments	Num. of positive comments		Num. of negative comments		Verified like rate
Hos1	228	170	75%	58	25%	5/3.7
Hos2	1442	578	40%	864	60%	5/3
Hos3	1640	788	48%	852	52%	5/3
Hos4	1022	721	70%	501	30%	5/3
Hos5	928	506	55%	422	45%	5/3.4
Hos6	1896	900	47%	996	53%	5/3.2
Hos7	608	246	40%	322	60%	5/3,2
Hos8	816	292	36%	524	54%	5/3.2
Hos9	1026	404	40%	622	60%	5/3.4
Hos10	1290	400	31%	890	69%	5/3
Hos11	1076	464	44%	612	56%	5/3.5
Hos12	1047	450	%43	597	%57	5/3.1
Total	13019	5919	%47,5	7260	%52,5	5/3,25

Table II indicates a high level of public satisfaction with Turkish mega hospitals, with an average rating of 3.5 out of 5, or 70% of the hospitals receiving positive feedback.

Table III Ratios of Dimensions According to General Service Quality

Quality Dimensions	Rate. of positive comments		Rate of negative comments	
Physical Quality	3242	%59	2252	%41
Technical Quality	1816	%51,1	1738	%48,9
Communication Quality	1747	%44	2224	%56

The proportionate appraisal of the remarks made about hospitals is displayed in Table III. These figures indicate that 42.2% of the comments addressed the dimension of physical quality. The technical quality of healthcare accounted for 27.3%. Lastly, the communication quality factor received comments from 30.5% of respondents. As a result, the majority of remarks made by patients were concerned with their physical state. Second, they discussed the communication quality factor and shared their thoughts.

Table IV The Contentment Levels of The Quality Aspects

Quality Dimensions	Rate. of positive comments		Rate of negative comments	
Physical Quality	3242	%59	2252	%41
Technical Quality	1816	%51,1	1738	%48,9
Communication Quality	1747	%44	2224	%56

When Table IV is examined, with a rate of 59%, it is evident that the physical quality component is the highest for mega hospitals. Turkish City hospitals' physical attributes are deemed satisfactory by patients or their family members. 41% of patients are dissatisfied with their physical attributes. Second, the technological standard of Turkish City hospitals is highly

regarded by patients and their families. Stated otherwise, the hospital's level of healthcare skill is good. Doctors perform their tasks expertly and with great training. A 51.1% satisfaction rate is seen. It is clear from this that Turkish residents believe the human resources employed by city hospitals are high quality. Lastly, there is unhappiness with the dimension of communication quality. Relatives of patients are unable to interact effectively.

FINAL THOUGHTS AND SUGGESTIONS

The fact that the buildings of Turkish city hospitals are new and integrated (campus) structures is considered advantageous for patients. It was assumed that it would be advantageous if all the health units needed by the patients were in the same region. In addition, city hospitals stand out in terms of equipment due to the innovation of technological devices and the quality of all necessary materials. In addition, the architectural structure of the city hospitals was generally evaluated positively, the hotel services were generally appreciated, and since they were mostly new buildings, they also received full marks in terms of cleanliness.

The recommendations of this research can be summarized as follows. To facilitate transportation within Mega Hospitals, increasing the number of directional signs, installing color strips, and increasing the number of consultant personnel would be good. The number of doctors, nurses, and health technicians should be increased to minimize waiting times and improve service quality. To facilitate transportation to the hospital, joint efforts should be made with local governments to ensure that patients can easily reach hospitals.

In general, Turkish citizens are satisfied with Turkish Mega hospitals. However, there is dissatisfaction with health communication. This situation may end with the introduction of health communication courses in medical faculties, nursing faculties, and other health-related higher education departments. In addition, health management performed by professionals will increase the quality of health service delivery.

Establishing mega hospitals of this size in Turkey is one way to accelerate health tourism activities.

When we look at the literature, it can be said that city hospitals contribute to the country's great power in the field of health tourism. The Turkish government has built huge hospitals for both its own people and international patients. The aim is to facilitate access to health services for the Turkish people and to provide quality health services. For foreign patients, that is, patients coming from abroad; their alternative health service demands have been helped. In addition, the Turkish state aims to achieve great success in the international health market by attracting a large financial resource to its own territory. Current health policies support this situation. For this reason, the Turkish government has established the Health Tourism Department Headship within the Ministry of Health.

The duties of this department are as follows;

- Planning services related to Health Tourism and Tourist Health, granting necessary permissions

- Conducting work and transactions related to Health Tourism in coordination with relevant institutions and organizations,
- Creating acceptance criteria for patients coming to our country for treatment from abroad in terms of Health Tourism and examining the demands and complaints of these patients,
- Aiding and consultancy services to patients within the scope of Health Tourism and Tourist Health when necessary and keeping their records,
- Planning and coordinating transactions related to patients coming to our country within the scope of bilateral cooperation in the field of health and deemed appropriate for treatment,
- Ensuring coordination with International Health Services Corporation (USHAŞ),
- Performing other duties assigned by the General Manager [12].

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