

A STUDY TO UNDERSTAND THE PROBLEM OF PATIENT'S GRATIFICATION LEVEL WITH THE EXISTING HEALTHCARE SERVICES IN BANGALORE

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Abstract—Patient satisfaction is a point that is significant both to clinical (medicinal) services suppliers, the patients (shoppers) themselves and other outsider partners in the clinical consideration industry. For social insurance suppliers guaranteeing that expends are fulfilled is a ceaseless exertion. It is hence basic to them that the genuine condition of shopper fulfillment is known. To accomplish this, the social insurance suppliers set out on research to feel the beats of the buyers and find methods of serving them better. This paper endeavors to clarify what comprises fulfillment in the point of view of the buyers and the method(s) that can be embraced by social insurance suppliers/specialists to reveal factors that are liable for purchaser fulfillment. An exploratory, descriptive design, Data was collected by using questionnaire through Google forms and the sample consisted of a random sample of 150 patients from different hospitals. There was no statistically significant difference in relation to the department (medical or surgical), sex, age, educational level, and residency. Additionally, an effort should be made to improve hospitalization services. Evaluating patients' satisfaction should be constant to reformulate the baseline and to be able to assess interventions and changes in care provision.

Keywords—Assessment, Clinical Negligence Claims, Healthcare, Hospital, Patient Satisfaction.

1. INTRODUCTION:

A patient's demeanor of fulfillment or disappointment is a judgment on the nature of emergency clinic care in the entirety of its viewpoints. Whatever its qualities and confinements, tolerant fulfillment is a marker that ought to be fundamental to the appraisal of the nature of care in medical clinics. Patient's gratification is a significant and ordinarily utilized marker for estimating the quality in medicinal services. Patient satisfaction influences clinical results, quiet maintenance, and clinical negligence claims. It influences the convenient, productive, and quiet focused conveyance of value human services. Understanding fulfillment is in this manner an intermediary yet an exceptionally viable pointer to quantify the achievement of specialists and emergency clinics. Healthcare industry keeps on confronting a few difficulties from nature. Among many, one of the basic difficulties is to improve the quality and effectiveness of patient consideration. The capacity of the social insurance association to convey quick and powerful patient consideration is basic to its prosperity. Anyway empowering medical clinics to give better social insurance to their patients require huge different issues like expanding efficiencies in how the staff conveys the administration extending from guard perspectives, affirmation strategies, charging arrangements to release of the patients from the emergency clinics.

"Hospital" originates from the Latin for both "visitor" and "have," and the genuine soul of friendliness is at the center of the medical clinic experience. The first strategic emergency clinics was to fill in as places of leniency, asylum, and kicking the bucket for pioneers coming back from the Holy Land at the hour of the late Christian vestige. The endeavoring to satisfy patients is in amicability with the administration calling of medication and is unquestionably the proper activity. In others, there is a coordinated exertion among governments, worker's guilds, good cause, strict associations, or other co-ordinate bodies to convey arranged human services administrations focused to the populaces they serve. Be that as it may, medicinal services arranging has been depicted as frequently developmental instead of progressive. Similarly, as with other social institutional structures, wellbeing frameworks are probably going to mirror the history, culture, and financial matters of the states in which they advance. These characteristics beset and entangle global examinations and block any widespread standard of execution.

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The World Health Organization (WHO) characterizes wellbeing frameworks as follows:

"A wellbeing framework comprises all things considered, individuals and activities whose essential plan is to advance, reestablish or look after wellbeing. This incorporates endeavors to impact determinants of wellbeing just as more straightforward wellbeing improving exercises. A wellbeing framework is, along these lines, more than the pyramid of freely possessed offices that convey individual wellbeing administrations. It incorporates, for instance, a mother thinking about a wiped-out kid at home; private suppliers; conduct change programs; vector-control crusades; medical coverage associations; word related wellbeing and security enactment. It incorporates between sectoral activity by wellbeing staff, for instance, empowering the service of instruction to advance female training, a notable determinant of better wellbeing."

Human services industry is one of the most powerful segments of the worldwide economy. The business keeps on confronting a few challenges from nature. Among many, one of the basic difficulties is to improve the quality and proficiency of patient consideration. The human services heads and clinical suppliers are faced with conveyance of clinical consideration to patients securely and safely. They are progressively required to get new abilities to capably play out their assignments. There is a need to drive the clinical experts also, the suppliers to make understanding driven administrations.

The medicinal services associations ought to understand the advantages of improving patient consideration as fulfilled and faithful clients. They are required to offer better types of assistance to patients to build clients proceeded with sponsorships. The capacity of the medicinal services association to convey quick and powerful patient consideration is basic to its prosperity. In any case empowering emergency clinics to give better social insurance to their patients require a critical different issue like expanding efficiencies in how the staffs conveys the administration running from guard mentalities, confirmation methodology, charging arrangements to release of the patients from the medical clinics. If a specialist is powerful in utilizing this instrument to associate with her patient, she will at that point see that arrival through better patient reliability. These interchanges through the entrance come down to the supplier imparting a promise to quiet mind and telling patients they can confide in them. A portion of the significant activities taken by the Government of India to advance Indian human services industry are as per the following:

In Union Budget 2020-21, Rs 35,600 cr. (US\$ 5.09 billion) has been designated for nourishment related projects. The legislature has reported Rs 69,000 cr. (US\$

9.87 billion) expense for the wellbeing division that is comprehensive of Rs 6,400 cr. (US\$ 915.72 million) for PMJAY in Union Budget 2020-21. The Government of India means to build medicinal services spending to three percent of the Gross Domestic Product (GDP) by 2022. In February 2019, the Government of India set up new All India Institute of Medical Sciences (AIIMS) at Manethi, District Rewari, and Haryana at an expense of Rs 1,299 cr. (US\$ 180.04 million). The Union Cabinet affirmed setting up of National Nutrition Mission (NNM) with a three- year financial plan of Rs 9,046 cr. (US\$ 1.29 billion) to screen, manage, fix targets, and guide the nourishment related intercessions across services. On September 23, 2018, Government of India propelled Pradhan Mantri Jan Arogya Yojana (PMJAY), to give medical coverage worth Rs 500,000 (US\$ 7,124.54) to more than 100 million families consistently. In August 2018, the Government of India has endorsed Ayushman Bharat-National Health Protection Mission as a midway Sponsored Scheme contributed by both focus and state government at a proportion of 60:40 for all States, 90:10 for uneven North Eastern States and 60:40 for Union Territories with law-making body. The inside will contribute 100 percent for Union Territories without law making body. The Government of India has propelled Mission Indra Dhanush with the point of improving inclusion of vaccination in the nation. It means to accomplish at least 90 percent inoculation inclusion by December 2018 which will cover unvaccinated and mostly immunized kids in country and urban regions of India. Healthcare administrations comprise of clinical experts, associations, and auxiliary human services labourers who give clinical consideration to those out of luck. Wellbeing administrations serve patients, families, networks, and populaces. They spread crisis, deterrent, rehabilitative, long haul, emergency clinic, analytic, essential, palliative, and home consideration. These administrations are revolved around making social insurance open, high calibre, and patient focused. A wide range of sorts of care and suppliers are vital so as to offer effective wellbeing administrations.

"On the off chance that you are a patient at essential consideration practice or you have some cardiovascular issue and you have a continuous relationship with a cardiologist, I believe it's extremely useful to have the option to proceed with the discussion outside of the workplace". "Also, when you've done that a few times, you feel that association with your supplier, you have a feeling that they are focused on your wellbeing and to guarantee that you have great results." Wellbeing IT can likewise assume a job in improving emergency clinic efficiencies, which can impact persistent fulfilment. Many times, it happens that with a capable specialist and an agreeable patient, the issues endure due to the strategies, work culture, and mentality appeared by the medical clinic. Customarily, emergency clinics have had discrete practical administrations, for example, house- keeping, dietary administrations, drug store, research facility, and so on. Shockingly, this specialization has prompted more fracture, expensive consideration, and not exactly perfect client

assistance. Building and supporting an assistance situated authoritative culture is significant for the accomplishment of any association. A few changes are being found in the administration systems with the objective of serving better and improving the administration quality.

2. LITERATURE REVIEW:

A literature review is a type of review article. A writing audit is an academic paper that presents the present information including considerable discoveries just as hypothetical and methodological commitments to a specific subject. Writing surveys are optional sources and do not report new or unique exploratory work. Frequently connected with scholarly situated writing, such surveys are found in scholastic diaries and are not to be mistaken for book audits, which may likewise show up in a similar distribution. The review covers the patient fulfillment, Physician Patient Relationship, and administration quality in existing healthcare services association in Bangalore. The writing survey investigates the various issues related with Patient satisfaction, human services supplier fulfillment and quality improvement. The estimation of patient fulfillment and the discoveries of experimental examinations are then checked on, including rundowns of impact sizes. Persistent fulfillment data can give a relevant proportion of administration quality and fills in as an indicator of wellbeing related conduct. Issues meriting further examination and proposals regarding look into techniques are presented in past article.

Some past scholarly articles are listed below:

Rust and Williams (1994) in their study to decide the impacts of client fulfillment and length of support on repurchase conduct kept up that higher fulfillment and longer length of support of administrations anticipated repurchasing conduct. This is on the grounds that when clients are happy with the administrations that they get; their odds of returning are high than when they are disappointed with the administrations they get. Furthermore, the more drawn out length of support anticipated higher repurchase conduct since longer support originates from fulfillment what is more, therefore bringing about clients turning out to be joined to the administrations and proceed with support.

Smith and Swinehart (2001) called attention to a solid connection between nature of item or administration furthermore, fulfillment of clients. As indicated by them, clients' discernment with respect to nature of items or administrations achieves fulfillment in their brain. This finding recommends that the social insurance conveyance framework ought to be made to be extremely successful as far as dealing with the patients as this impact their fulfillment levels.

Kumar and Lim (2008) in their investigation finished up that lady are affected by administration quality more emphatically than men though men are centered on seen financial incentive in steadfastness choices. Accordingly, it is recognizable that sex contrasts exist among male and female clients in their view of administration which could impact their levels of fulfillment. Like these discoveries, it has been archived that ladies report more noteworthy generally fulfillment than men (Buller & Buller, 1987). Relatedly, a few examinations have proposed that men are less fulfilled as clients than females (Chisick, 1997; Singh, 1990).

Sivesan and Karunanithy (2013) inspected the connection between close to home demographical factors (age, sex, and salary level, instructive level, and conjugal status) and consumer loyalty. The analysts utilized shut finished polls to gather the required information. The orderly irregular examining technique was utilized to choose respondents for the examination. Results from the information examination demonstrated that there is no critical distinction between the individual segment factors, for example, sexual orientation and conjugal status however there is not huge differences among age, pay and instruction level on administration quality.

3. OBJECTIVES:

The objective of the Study is to understand the problems of patient's satisfaction levels with existing health care services in Bangalore.

- To evaluate the outcomes for which the patient experience for the quality of medical service they receive from the hospitals.
- To analyze the quality of medical service in the hospitals.
- To determine and examine if there are differences among the hospitals in the satisfaction of the patients.

4. LIMITATIONS:

- Due to time constraint and administrative issues of the hospital, the samples size had to be restricted.
- The sample size was limited to 150.
- The respondents or patients might not have disclosed their actual opinions on certain issues related to their satisfaction level with existing healthcare, which could be confidential in nature.
- Due to covid-19 outbreak could not interview patients personally.

5. METHODOLOGY:

For this survey, the sample of 150 patients has filled the questionnaire through the Google form and the sample is drawn systematically. Their response is recorded as per questionnaire.

The source of data collections is primary and secondary. The data is directly gathered through the perceptions, studies, questionnaire, and case analyses as per necessities. Questionnaire has prepared through Google forms. The data is gathered from the books, internet, articles journals and other sources.

Data Analysis:

Data interpretation is done through basic statistical methods. The relevant information is introduced in fitting tables in this paper. Some of the relevant and interesting data are presented the form of graph and charts. The motivation behind Data Analysis is to separate valuable data from information and taking the choice dependent on the information examination. At whatever point we take any choice in our everyday life is by contemplating what happened last time or what will occur by picking that specific choice. This is only examining our past or future and settling on choices dependent on it. For that, we accumulate recollections of our past or dreams of our future. So that is only information examination. Presently same thing expert accomplishes for business designs, is called Data Analysis.

Tools of data analysis:

Data analysis tools make it simpler for clients to process and control information, break down the connections and relationships between informational indexes, and it likewise assists with recognizing examples and patterns for translation. Tools of data analysis used in this survey are Structured Questionnaire and Interview.

Data interpretation:

Data interpretation is defined as the usage of procedures through which data is reviewed for the purpose to reach a conclusion. The interpretation of data relegates an importance to the data dissected and decides its meaning and suggestions. The significance of information translation is apparent, and this is the reason it should be done appropriately. Information is probably going to show up from various sources and tends to enter the investigation procedure with indiscriminate requesting. Information examination will in general be amazingly emotional. In other words, the nature and objective of understanding will change from business to business, likely corresponding to the kind of information being examined. While there are a few unique kinds of procedures that are actualized dependent on singular information nature, the two broadest and most basic classes are "quantitative examination" and "qualitative investigation". Quantitative investigation alludes to a lot of procedures by which numerical information is analyzed. Quantitative information is estimated by outwardly introducing correlation tests between at least two factors of importance. Various procedures can be utilized together or independently, and correlations can be made to eventually come to an end result.

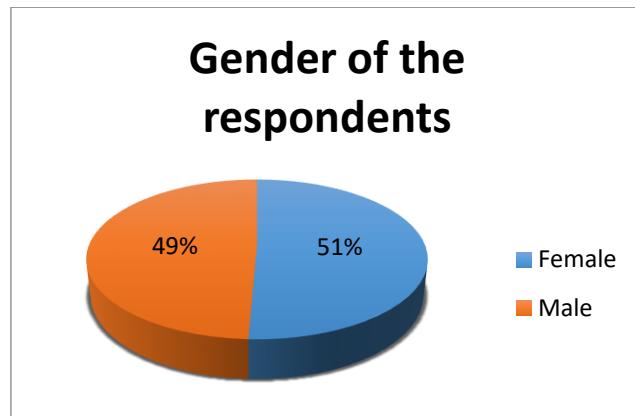
The motivation behind assortment and translation is to secure valuable and usable data and to settle on the most educated choices conceivable. From organizations, to love birds looking into their first home, information assortment and understanding gives boundless advantages to a wide scope of establishments and people. Information investigation and translation, paying little heed to strategy and subjective/quantitative status, may incorporate the accompanying qualities:

Data distinguishing proof and clarification Investigating of information Distinguishing proof of information exceptions. Data analysis and interpretation, at long last, improves forms and distinguish issues. It is hard to develop and make reliable enhancements without, in any event, insignificant information assortment and understanding.

DEMOGRAPHIC ANALYSIS:

Table 1: Gender of the respondents

Particulars	Respondents	Percentage
Female	76	51%
Male	74	49%
Total	150	100%

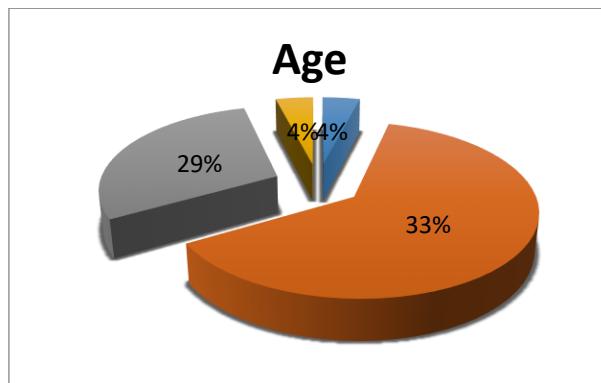


INTERPRETATION:

This chart and table show that 49% of the respondents are Male and 51% of the respondents are Female. Hence majority of the respondents are Female.

Table 2: Age of the Respondents

Age	No. of respondents	% of response
<15	06	28.5%
15-25	94	24.4%
25-45	44	32.5%
Above 45	06	14.6%

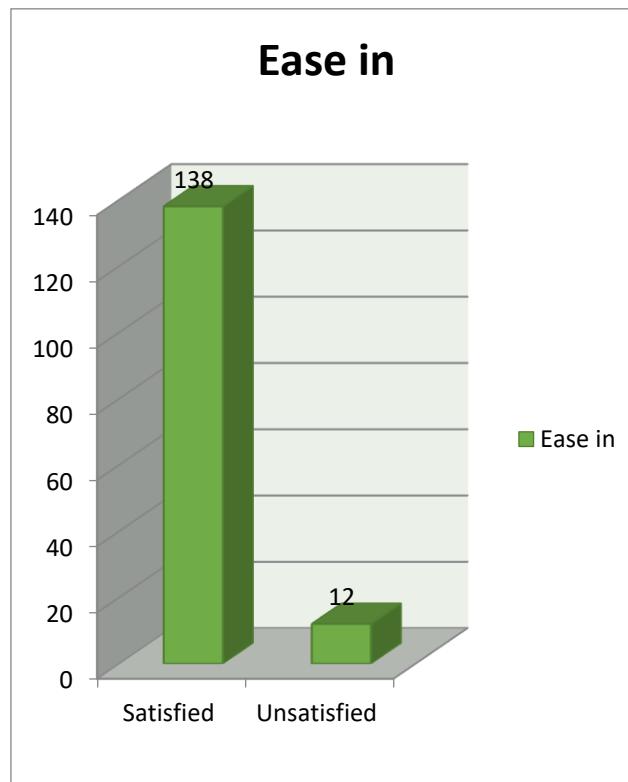


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From this table it is interpreted that maximum respondent are from 15-25 age groups.

Table 3: Ease in obtaining follow-up information and care (test results, medicines, and care instructions)?

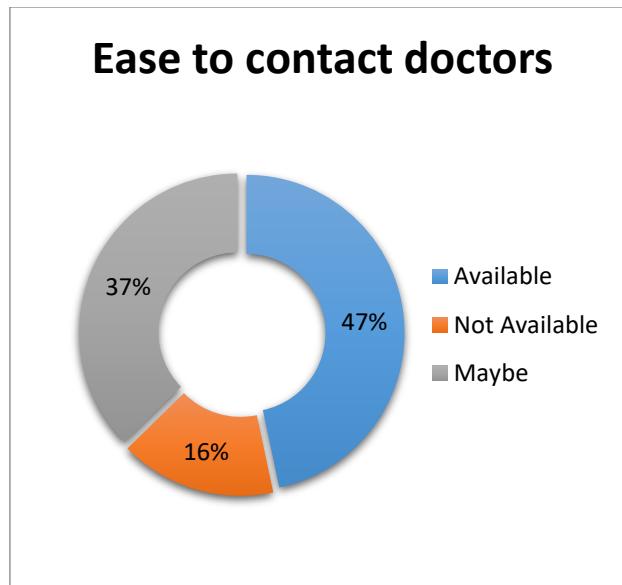
Value	Count
Satisfied	138
Unsatisfied	12



From this data it is interpreted that 92% the respondents are satisfied, and 8% respondents are unsatisfied.

Table 4: Ease in contacting your doctor when our office is closed (nights and weekends)?

Value	Count
Available	70
Not Available	24
Maybe	56



From this data it is interpreted that 46% of respondents are able to contact their doctor in nights and weekends, 38% respondent are not able to contact their doctors during weekends and 16% of respondents are not sure.

Chi-Square Tests:

A chi-squared test, additionally composed as χ^2 test, is a factual speculation test that is legitimate to perform when the test measurement is chi-squared appropriated under the invalid theory, explicitly Pearson's chi-squared test and variations thereof. Pearson's chi-squared test is utilized to decide if there is a measurably noteworthy distinction between the normal frequencies and the watched frequencies in at least one classifications of a possibility table.

In the standard uses of this test, the perceptions are arranged into fundamentally unrelated classes. On the off chance that the invalid speculation is valid, the test measurement processed from the perceptions follows a χ^2 recurrence appropriation. The motivation behind the test is to assess how likely the watched frequencies would be expecting the invalid theory is valid.

Test insights that follow a χ^2 conveyance happen when the perceptions are autonomous and typically circulated, which suspicions are regularly supported under as far as a possible hypothesis. There are additionally χ^2 tests for testing the invalid speculation of freedom of a couple of arbitrary factors dependent on perceptions of the sets

Gender of the Respondent * Scale of 0-10 How would you rate the overall care you received from your provider? Cross tabulation

Count

		Scale of 0-10 How would you rate the overall care you received from your provider?				
		0	1	2	3	4
Gender of the Respondent	Female	0	2	0	2	2
	Male	0	0	1	1	4
	Gender	1	0	0	0	0
Total		1	2	1	3	6

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Gender of the Respondent * Scale of 0-10 How would you rate the overall care you received from your provider?

Cross tabulation

Count

		Scale of 0-10 How would you rate the overall care you received from your provider?				
		5	6	7	8	9
Gender of the Respondent	Female	5	9	12	28	10
	Male	7	9	12	19	17
	Gender	0	0	0	0	0
Total		12	18	24	47	27

Table: 4.2.1

Gender of the Respondent * Scale of 0-10 How would you rate the overall care you received from your provider?

Cross tabulation

Count

		Scale of 0-10 How would you rate the overall care you received from your provider?		Total
		10		
Gender of the Respondent	Female			3
	Male			6
	Gender			0
Total				9 150

Chi-Square Tests

	Value	df	Asymp. Sig. (2-sided)
Pearson Chi-Square	158.874 ^a	20	.000
Likelihood Ratio	22.057	20	.337
N of Valid Cases	150		

Table: 4.2.2

Symmetric Measures

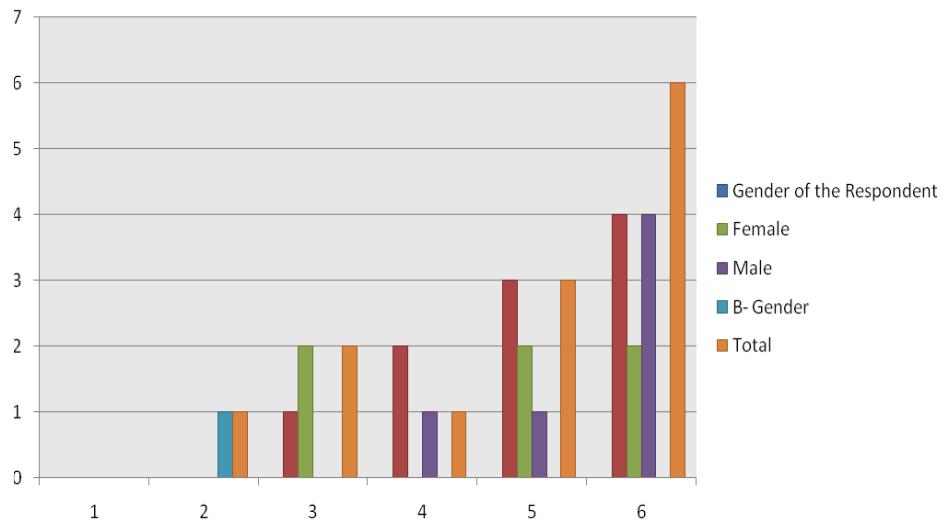
		Value	Approx. Sig.
Nominal by Nominal	Phi	1.029	.000
	Cramer's V	.728	.000
N of Valid Cases		150	

Table: 4.2.3

H_0 : There is significant difference among the Gender of patients as regard to the satisfaction of the quality of service they receive from the hospitals.

H_1 : There is no significant difference among the Gender of patients as regard to the satisfaction of the quality of service they receive from the hospitals.

GRAPH:



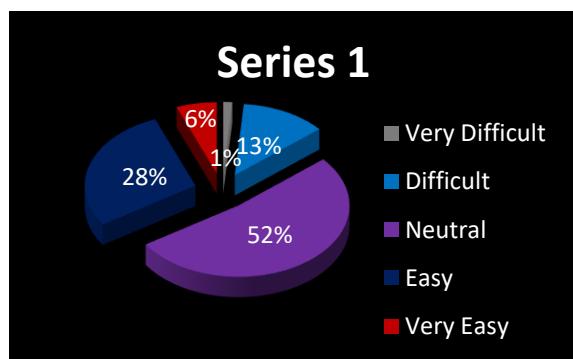
INTERPRETATION:

The calculated value is lesser than the normal value hence we reject null hypothesis (H_0) is rejected and alternative hypothesis is accepted. That means quality of services which they receive from the hospital is not dependent on Gender of the patients.

$H_0 < 0.05$ Hence we reject H_0 .

Table 5: How easy was it to get a follow-up appointment?

Value	Count
Very Difficult	2
Difficult	19
Neutral	79
Easy	43
Very Easy	9



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From this graph we can interpret that most of the respondents' do not have issues with taking appointment with doctor, some will feel easy while taking appointment. Then also some are feeling it's very difficult while taking appointment with the doctors. The number of the respondents for neutral are equals to 79, for easy is 43, for very easy the number of respondents is 9, the number of the respondents who facing issues difficult and very difficult are 19 and 2.

6. CONCLUSION:

The present study, patients of different hospitals of Bangalore were satisfied with patient care components & other facilities provided in the hospital. In the aspect of physician giving health advice to patients and informing about the side effects of the medicine they are prescribing to the patients; the patients are satisfied with information. In the survey its shown patients are still getting issues while taking appointment to meet the doctors. Further, private ward patients were more satisfied some of the services. Satisfaction survey is thus one of the prime responsibilities of the hospital to measure the level of satisfaction and try to find out the ways and means for improving satisfaction of their patients. The gender analysis of patient satisfaction with respect to various hospital related services reveals that male patients were more satisfied in comparison with female patients. This analysis of patient satisfaction with respect to various hospital related services reveals that age group of 15-25 years of people are more answered and satisfied with medical care system are available in the Bangalore. Examined the age contrasts in the degrees of general fulfillment with social insurance benefits the clients receive revealed that huge age contrasts exist in the degrees of general fulfillment with by and large social insurance benefits the clients get. As far as the space explicit fulfillment, critical age contrasts exist in client fulfillment with evaluation by specialists/medical attendants, Treatment result and Facilities. It is an unexpected actuality - the better you are, the better you should turn into. Quality does not stop. It ought to be straight and continually climbing. One ought to endeavor to give better mind and take off over every single patient's desires.

The examination discoveries propose that following measures might be taken by the approach creators and medical clinic overseers to build the patient fulfillment at general wellbeing offices: Efforts ought to be made to lessen the patient burden at the more significant level offices with the goal that specialists and other staff can give more consideration and time to the patients; Efforts are likewise expected to reinforce framework and HR at the lower level wellbeing offices. The discoveries of the current investigation can be used to improve the administrations at general wellbeing offices of the state bringing about the more fulfillments of patients profiting such general wellbeing offices. Medicinal services conveyance is a help-based industry and patient fulfillment is a basic achievement factor in estimating the emergency clinics execution similarly as in other assistance-based associations. Seeing how patients see the administration and the capacity to dissect administration quality can profit the clinic supervisors in making both quantitative also, subjective choices. Explicit information got from investigation of administration quality can be utilized in quality the board henceforth chiefs of the medical clinic would have the option to screen and keep up the nature of administration given by the office.

7. SUGGESTION:

Based on the findings above the following recommendations are recommended for improved consumer loyalty and human services conveyance:

- Consideration ought to be paid to the person contrasts in the conveyance of medicinal services administrations to the patients as their sex and ages have been found to effect sly affect the general fulfillment just as a few space explicit regions including appraisal by specialists/medical caretakers, treatment results, correspondence/human relations and the offices.
- Wellbeing laborers ought to do ordinary appraisal of the fulfillment levels of clients to illuminate improved human services conveyance and adjustment of their business as usual.
- Patients ought to be urged to communicate their concerns, assessments, perspectives and conceivable propose transforms they might want to consider actualized to be consumer loyalty has been connected with organization productivity, client steadfastness and maintenance.

For future investigations, a bigger example ought to be utilized and the fulfillment levels ought to be thought about among open and private wellbeing offices just as how consumer loyalty impacts client dependability and maintenance

This would guarantee increment piece of the overall industry and persistent development. Then again, inability to do so may bring about loss of upper hand to the opponent contenders. This examination shows that noteworthy contrasts are found among emergency clinics which are viewing for client acknowledgment. Medical clinic and social insurance directors must see buyer fulfillment reviews as a system to gain proficiency with the desires and view of the patients.

8. REFERENCES:

- Dr. D. Rama Mohan; Dr. Kanagaluru Sai Kumar (2011) “A study on the satisfaction of patients with reference To Hospital Services”, available online at <http://zenithresearch.org.in/>
- Sucharitha Sureshet.al (2015) “Patient Satisfaction: A study in General and Private Wards of a Multispecialty Hospital”, available online at <https://www.researchgate.net/>
- Padma Panchapakesan et.al (2010) “Service quality and its impact on customer satisfaction in Indian hospitals”, available online at <https://www.researchgate.net/>
- Berry, L.L. and Bendapudi, N. (2007), “Health care: a fertile field for service research”, Journal of Service Research, Vol. 10 No. 2, pp. 111-22.
- Budd, J. and Raber, D. (1996), “Discourse analysis: method and application in the study of information”, Information Processing & Management, Vol. 32 No. 2, pp. 217-26.
- Berry, L.L. and Bendapudi, N. (2007), “Health care: a fertile field for service research”, Journal of Service Research, Vol. 10 No. 2, pp. 111-22.
- Budd, J. and Raber, D. (1996), “Discourse analysis: method and application in the study of information”, Information Processing & Management, Vol. 32 No. 2, pp. 217-26.
- Berry, L.L. and Bendapudi, N. (2007), “Health care: a fertile field for service research”, Journal of Service Research, Vol. 10 No. 2, pp. 111-22.
- Budd, J. and Raber, D. (1996), “Discourse analysis: method and application in the study of information”, Information Processing & Management, Vol. 32 No. 2, pp. 217-26.
- Berry, L.L. and Bendapudi, N. (2007), “Health care: a fertile field for service research”, Journal of Service Research, Vol. 10 No. 2, pp. 111-22.
- Cone, D.C. (2007), “Knowledge translation in the emergency medical services: a research agenda for advancing pre-hospital care”, Academy of Emerging Medicine, Vol. 14, pp. 1052-7.
- Craig, T.J., Perlin, J.B. and Fleming, B.B. (2007), “Self-reported performance improvement strategies of highly successful veterans’ health administration facilities”, American Journal of Medical Quality, Vol. 22 No. 6, pp. 438-44.
- Cone, D.C. (2007), “Knowledge translation in the emergency medical services: a research agenda for advancing pre-hospital care”, Academy of Emerging Medicine, Vol. 14, pp. 1052-7.
- Porter, M.E. and Teisberg, E.O. (2007b), “Changing the organization of health care – reply”, Journal of the American Medical Association, Vol. 298, pp. 287-8.
