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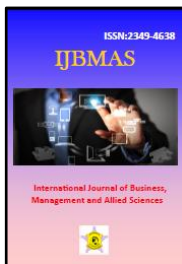
THE IMPACT OF HOSPITAL ACCREDITATION ON THE PATIENTS SATISFACTION OF EMERGENCY DEPARTMENT SERVICES

Dr. Zuber Mujeeb Shaikh

Director, Corporate Quality Improvement,

Dr. Sulaiman Al-Habib Medical Group, Riyadh-11643, Kingdom of Saudi Arabia

Email-drzuber5@yahoo.co.in



ABSTRACT

The quality of hospital Emergency Department (ED) / Emergency Room (ER) Service is one of the most relevant items of health care quality perceived by patients and by their families. Patient satisfaction is considered a way of measuring the quality of services provided. **Objectives:** To study the impact of National Accreditation Board for Hospitals & Healthcare Providers (NABH) Accreditation, India on the patients satisfaction of emergency department services. **Methods:** It is a quantitative, descriptive and inferential research based case study in which sample of a population was studied by structured satisfaction survey questionnaires (before and after the accreditation) in a private tertiary care hospital at Secunderabad, Telangana State, India to determine its characteristics, and it is then inferred that the population has the same or different characteristics. **Significance of Research:** It was observed initially before the accreditation that there was a lower patient satisfaction rate of the hospital Emergency Department Services, which was affecting the study hospitals' business. **Hypothesis:** Null Hypothesis (Ho) and Alternative Hypothesis (H1) were used and tested to compare the before and after impact of accreditation by applying to each question in the questionnaire. **Study Design:** The closed ended questionnaire was developed considering the Emergency Department Services by incorporating the six dimensions of quality Safe, Timely, Effective, Efficient, Equitable, and Patient-centred (STEEP) and tested prior to implementing. Questionnaires were given to the patients' families for completion upon using the Emergency Department Services two months before and two months after the accreditation. The data were collected in order to cover all three shifts of the Emergency Department Services. **Study Population:** Simple random sampling method was selected, the researcher had involved all conscious patients (clinical conditions) from all age groups. **Data Collections:** Primary data were collected from the survey questionnaires. Secondary data were collected from relevant published

journals, articles, research papers, academic literature and web portals.

Conclusion: The chi-square test performed at the 5 % level of significance indicates that, there is a significant difference between groups of patients participating before and after accreditation and their satisfaction levels of overall experience with Emergency Department Services ($p < 0.001$). The satisfaction score has improved from before accreditation compared to after accreditation which indicates that the accreditation has a positive impact on the satisfaction of Emergency Department Services of the study hospital.

Key words: Patient Satisfaction, National Accreditation Board for Hospitals & Healthcare Providers (NABH) Accreditation, Emergency Department

INTRODUCTION

Quality has become a fundamental requirement for all healthcare organizations in order to survive and succeed in this competitive, demanding and challenging healthcare service industry. Today, developed and developing nations are working towards continuous quality improvement and patient safety by achieving the national and or international healthcare accreditation and providing safe, effective, patient-centred, timely, efficient and equitable health care services to all their patients, families and caretakers. Accreditation of a health care organization is an external evaluation of the level of compliance against a set of organizational standards. Healthcare accreditation standards are advocated as an important means of improving structure, process and outcome. ⁱ

REVIEW OF LITERATURE

The increased international focus on improving patient outcomes, safety and quality of care has led stakeholders, policy makers and health care provider organizations adopt standardized processes for measuring health care systems. Patient satisfaction has become a key criterion by which the quality of health care services is evaluated. The literature emphasizes that patients who are satisfied with the provision of health care tend to be more compliant to their treatment plan, maintain their follow up visits; and are more willing to recommend the hospital to others.ⁱⁱ The literature emphasizes that hospital accreditation and patient satisfaction are both considered important quality indicators of healthcare delivered.ⁱⁱⁱ The results of patient satisfaction surveys can be used to monitor the quality of health care provided,^{iv} to find out any shortages, to provide the necessary interventions, and as a valuable source of strategic planning of health services.^v

DATA ANALYSIS

Table 1. Patient participation before and after accreditation

Group	Frequency	Percentage
Before Accreditation	400	49.4
After Accreditation	410	50.6
Total	810	100

Table 1 depicts that there were 400 patients participated before accreditation and 410 patients participated after accreditation. There is improvement in the participation of patients after accreditation.

Table 2. Group and Age distribution

Group	Age Group					Chi-square test statistic, p-value
	<17yrs	17-25yrs	25-55yrs	55-65yrs	>65yrs	
Before Accreditation	52	108	92	90	58	0.310, 0.989
After Accreditation	51	115	98	89	57	
Total	103	223	190	179	115	

Hypothesis:

H₀: There is no significant difference in the Age categories between before the accreditation group and after accreditation group

H₁: There is a significant difference in the Age categories between before the accreditation group and after accreditation group

Table 2 depicts that at the 5 % level of significance, the chi-square test indicates there is no significant difference in the responses with respect to the age distribution between before accreditation and after accreditation with $p\text{-value} > 0.05$. Hence, H_0 is accepted and H_1 is rejected.

Table 3. Group and Gender Distribution

Group	Gender		Chi-square test statistic, p-value
	Male	Female	
Before Accreditation	216	184	0.028, 0.867
After Accreditation	219	191	
Total	435	375	

Hypothesis:

H_0 : There is no significant difference in the gender distribution between before the accreditation group and after accreditation group

H_1 : There is a significant difference in the gender distribution between before the accreditation group and after accreditation group

Table 3 depicts that at the 5 % level of significance, the chi-square test indicates there is no significant difference in the responses with respect to the gender distribution between before accreditation and after accreditation with $p\text{-value} > 0.05$. Hence, H_0 is accepted and H_1 is rejected.

Table 4. Group and geographical states (of India) Distribution

Group	Geographical states		Chi-square test statistic, p-value
	Same State	Other States	
Before Accreditation	252	148	0.003, 0.960
After Accreditation	259	151	
Total	511	299	

Hypothesis:

H_0 : There is no significant difference in the geographical states of patients between before the accreditation group and after accreditation group

H_1 : There is a significant difference in the geographical states of patients between before the accreditation group and after accreditation group

Table 4 depicts that at the 5 % level of significance, the chi-square test indicates there is no significant difference in the responses with respect to the distribution of geographical states between before accreditation and after accreditation with $p\text{-value} > 0.05$. Hence, H_0 is accepted and H_1 is rejected.

Table 5. Distribution of patients who speak Telugu, Non-Telugu and Group

Group	Language		Chi-square test statistic, p-value
	Telugu	Non-Telugu	
Before Accreditation	284	116	0.007, 0.933
After Accreditation	290	120	
Total	574	236	

Hypothesis:

H_0 : There is no significant difference in the language patients speak between before the accreditation group and after accreditation group

H_1 : There is a significant difference in the language patients speak between before the accreditation group and after accreditation group

Table 5 depicts that at the 5 % level of significance, the chi-square test indicates there is no significant difference in the responses with respect to the language distribution of the patients between before accreditation and after accreditation with $p\text{-value} > 0.05$. Hence, H_0 is accepted and H_1 is rejected.

Table 6. Distribution of number of hospital visits and Group

Group	Visits		Chi-square test statistic, p-value
	1st	2nd	
Before Accreditation	288	112	0.004,

After Accreditation	296	114	0.951
Total	584	226	

Hypothesis:

H₀: There is no significant difference in the number of hospital visits between before the accreditation group and after accreditation group

H₁: There is a significant difference in the number of hospital visits between before the accreditation group and after accreditation group

Table 6 depicts that at the 5 % level of significance, the chi-square test indicates there is no significant difference in the responses with respect to the visits between before accreditation and after accreditation with $p\text{-value} > 0.05$. Hence, H_0 is accepted and H_1 is rejected.

Table 7. Type of payment and Group

Group	Type of payment			Chi-Square test statistic, p-value
	Cash	Insurance	Government	
Before Accreditation	142	220	38	6.636, 0.036
After Accreditation	148	242	20	
Total	290	462	58	

p-value in bold indicates significant test with $p\text{-value} < 0.001$

Hypothesis:

H₀: There is no significant difference in the type of payment made between before the accreditation group and after accreditation group

H₁: There is a significant difference in the type of payment made between before the accreditation group and after accreditation group

Table 7 depicts that at the 5 % level of significance, the chi-square test indicates there is a significant difference in the responses with respect to the type of payment between before accreditation and after accreditation with $p\text{-value} = 0.036$. Hence, H_0 is rejected and H_1 is accepted. Hence, H_0 is rejected and H_1 is accepted.

Table 8. Responses of satisfaction with respect to waiting time and between Groups

Group	Satisfaction with respect to waiting time					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	63	73	27	116	121	107.72, <0.001
After Accreditation	12	16	14	212	156	
Total	75	89	41	328	277	

p-value in bold represents significant test with $p\text{-value} < 0.001$

Hypothesis:

H₀: There is no significant difference in the responses of satisfaction with respect to waiting time before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses of satisfaction with respect to waiting time between before the accreditation group and after accreditation group

Table 8 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses of satisfaction with respect to waiting time between before and after accreditation with $p\text{-value} < 0.001$. The responses of satisfaction have improved from $N=268$ (Satisfied=212, Highly satisfied= 156) from $N=237$ (Satisfied = 116, Highly satisfied= 121). Hence, H_0 is rejected and H_1 is accepted.

Table 9. Responses for level of involvement in decisions about patient's care between the before and after accreditation groups

Group	Level of involvement in decisions about patient's care					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	60	94	24	103	119	138.76, <0.001

After Accreditation	12	15	13	221	149
Total	72	109	37	324	268

p-value in bold represents significant test with p-value <0.001

Hypothesis:

H₀: There is no significant difference in the responses for level of involvement in decisions about a patient's care between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses for level of involvement in decisions about a patient's care between before the accreditation group and after accreditation group

Table 9 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses for level of involvement in decisions about a patient's care between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=370 (Satisfied=221, Highly satisfied= 149) from N=222 (Satisfied = 103, Highly satisfied= 119). Hence, H₀ is rejected and H₁ is accepted.

Table10. Responses for the management of patient's pain and between the before and after accreditation groups

Group	Management of patient's pain					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	73	72	20	119	116	118.91, <0.001
After Accreditation	9	19	17	233	132	
Total	82	91	37	352	248	

p-value in bold represents significant test with p-value <0.001

Hypothesis:

H₀: There is no significant difference in the responses to the management of the patient's pain between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses to the management of the patient's pain between before the accreditation group and after accreditation group

Table 10 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses to the management of the patient's pain between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=365 (Satisfied=233, Highly satisfied= 132) from N=222 (Satisfied = 103, Highly satisfied= 119). Hence, H₀ is rejected and H₁ is accepted.

Table11. Responses to the level of satisfaction with the way the health care provider explained treatment between the before and after accreditation groups

Group	Level of satisfaction with the way the health care provider explained treatment					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	59	88	33	118	102	138.74, <0.001
After Accreditation	15	8	16	219	152	
Total	74	96	49	337	254	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses to the level of satisfaction with the way the health care provider explained treatment between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses to the level of satisfaction with the way the health care provider explained treatment between before the accreditation group and after accreditation group

Table 11 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses responses to the level of satisfaction with the way the health care provider explained treatment between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=371 (Satisfied=219, Highly satisfied= 152) from N=220 (Satisfied = 118, Highly satisfied= 102). Hence, H_0 is rejected and H_1 is accepted.

Table12. Responses for the satisfaction with respect to privacy given to the patient and between the before and after accreditation groups

Group	Satisfaction with respect to privacy given to the patient					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	70	64	29	132	105	88.27, <0.001
After Accreditation	17	16	19	211	147	
Total	87	80	48	343	252	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H_0 : There is no significant difference in the responses on the satisfaction with respect to privacy given to the patient between before the accreditation group and after accreditation group

H_1 : There is a significant difference in the responses on the satisfaction with respect to privacy given to the patient between before the accreditation group and after accreditation group

Table 12 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses on the satisfaction with respect to privacy given to the patient between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=358 (Satisfied=211, Highly satisfied= 147) from N=237 (Satisfied = 132, Highly satisfied= 105). Hence, H_0 is rejected and H_1 is accepted.

Table13. Responses for the cleanliness and safety about the environment and between the before and after accreditation groups

Group	Cleanliness and safety about the environment					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	69	70	22	128	111	120.324, <0.001
After Accreditation	14	8	12	219	157	
Total	83	78	34	347	268	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H_0 : There is no significant difference in the responses on the cleanliness and safety about the environment between before the accreditation group and after accreditation group

H_1 : There is a significant difference in the responses on the cleanliness and safety about the environment between before the accreditation group and after accreditation group

Table 13 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses on the cleanliness and safety about the environment between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=376 (Satisfied=219, Highly satisfied= 157) from N=239 (Satisfied = 128, Highly satisfied= 111). Hence, H_0 is rejected and H_1 is accepted.

Table14. Responses on the confidentiality of patient's personal information and between the before and after accreditation groups

Group	Confidentiality of patient's personal information					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	55	51	26	140	128	79.56, <0.001
After Accreditation	11	12	12	223	152	
Total	66	63	38	363	280	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses on the confidentiality of patient's personal information between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses on the confidentiality of patient's personal information between before the accreditation group and after accreditation group

Table 14 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses responses on the confidentiality of patient's personal information between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=375 (Satisfied=223, Highly satisfied= 152) from N=268 (Satisfied = 140, Highly satisfied= 128). Hence, H₀ is rejected and H₁ is accepted.

Table15. Responses to the treatment provided to the patient and between the before and after accreditation groups

Group	Treatment provided to the patient					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	55	73	24	139	109	113.69, <0.001
After Accreditation	9	15	9	257	120	
Total	64	88	33	396	229	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses to the treatment provided to the patient between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses to the treatment provided to the patient between before the accreditation group and after accreditation group

Table 15 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses to the treatment provided to the patient between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=377 (Satisfied=257, Highly satisfied= 120) from N=248 (Satisfied = 139, Highly satisfied= 109). Hence, H₀ is rejected and H₁ is accepted.

Table16. Responses on the staff, helpfulness and compassion and between the before and after accreditation groups

Group	Staffs helpfulness and compassion					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	63	67	22	141	107	98.78, <0.001
After Accreditation	11	14	18	177	190	
Total	74	81	40	318	297	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses on the staff, helpfulness and compassion between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses on the staff, helpfulness and compassion between before the accreditation group and after accreditation group

Table 16 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses on the staff, helpfulness and compassion between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=367 (Satisfied=177, Highly satisfied= 190) from N=248 (Satisfied = 141, Highly satisfied= 107). Hence, H₀ is rejected and H₁ is accepted.

Table17. Responses on the flow of patient within the department and between before and after accreditation groups

Group	Flow of patient within the department					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	73	63	21	129	114	114.98, <0.001
After Accreditation	13	9	12	179	197	
Total	86	72	33	308	311	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses on the flow of patient within the department between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses on the flow of patient within the department between before the accreditation group and after accreditation group

Table 17 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses on the flow of patient within the department between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=376 (Satisfied=179, Highly satisfied= 197) from N=243 (Satisfied = 129, Highly satisfied= 114). Hence, H₀ is rejected and H₁ is accepted.

Table 18. Responses to the overall performance of the physicians and between before and after accreditation groups

Group	Overall performance of the physicians					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	68	58	31	136	107	111.53, <0.001
After Accreditation	9	11	17	182	191	
Total	77	69	48	318	298	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses to the overall performance of the physicians between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses to the overall performance of the physicians between before the accreditation group and after accreditation group

Table 18 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses to the overall performance of the physicians between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=373 (Satisfied=182, Highly satisfied= 191) from N=243 (Satisfied = 136, Highly satisfied= 107). Hence, H₀ is rejected and H₁ is accepted.

Table 19. Responses to the overall performance of the nurses and between before and after accreditation groups

Group	Overall performance of the nurses					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	60	61	37	136	106	100.72 <0.001
After Accreditation	12	13	14	202	169	
Total	72	74	51	338	275	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses to the overall performance of the nurses between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses to the overall performance of the nurses between before the accreditation group and after accreditation group

Table 19 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses to the overall performance of the nurses between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=371 (Satisfied=202, Highly satisfied= 169) from N=242 (Satisfied = 136, Highly satisfied= 106). Hence, H₀ is rejected and H₁ is accepted.

Table20. Responses to the overall experience with the ER department and between before and after accreditation groups

Group	Overall experience within ER department					Chi-square test statistic, p-value
	Highly Dissatisfied	Dissatisfied	Neither satisfied nor dissatisfied	Satisfied	Highly Satisfied	
Before Accreditation	65	69	25	124	117	102.307, <0.001
After Accreditation	14	13	13	183	187	
Total	79	82	38	307	304	

p-value in bold indicates significant test with p-value<0.001

Hypothesis:

H₀: There is no significant difference in the responses to the overall experience with the ER department between before the accreditation group and after accreditation group

H₁: There is a significant difference in the responses to the overall experience with the ER department between before the accreditation group and after accreditation group

Table 20 depicts that at the 5 % level of significance, the chi-square test results indicate that there is a significant difference in the responses to the overall experience with the ER department between before and after accreditation with p-value <0.001. The responses of satisfaction have improved from N=370 (Satisfied=183, Highly satisfied= 187) from N=241 (Satisfied = 124, Highly satisfied= 117). Hence, H₀ is rejected and H₁ is accepted.

Table21. Overall satisfaction score by combining the responses with respect to ER: (Higher the score the better the satisfaction, lower the score poorer the satisfaction level with the Emergency Department Service)

Overall satisfaction score by combining the responses with respect to Emergency Department Service				
Group	N	Mean	Standard Deviation	T test statistic, p-value
Before Accreditation	400	44.04	18.66	-9.824, <0.001
After Accreditation	410	54.69	11.15	

p-value in bold represents the test is significant with p-value <0.001

Hypothesis:

H₀: There is no significant difference in the overall satisfaction by combining the responses between before the accreditation group and after accreditation group

H₁: There is a significant difference in the overall satisfaction by combining the responses between before the accreditation group and after accreditation group

Table 21 depicts that at the 5 % level of significance, the t-test results indicate that there is a significant difference in the overall responses between before (M=44.04, SD=18.66) and after accreditation (M=54.69, SD=11.15) with p-value <0.001. The mean satisfaction score has improved from before accreditation compared to after accreditation. Hence, H₀ is rejected and H₁ is accepted.

CONCLUSION

The mean satisfaction score of patients satisfaction in Emergency Department Services has improved from before accreditation compared to after accreditation. This indicates that the accreditation has a positive impact on the satisfaction of Emergency Department Services of the study hospital.

LIMITATIONS OF THE STUDY: This study is limited to the Emergency Department Services of the study hospital and for a limited duration (before two months and after two months of accreditation) only.

DIRECTIONS FOR FUTURE RESEARCH: In future such research should be conducted to study the impact of national and international accreditations on the other services of the hospitals over a large period of time.

SOURCES OF FUNDING FOR THE STUDY: This research was self financed by the author himself.

IMPLICATIONS OF THE FINDINGS: The accreditation has a positive impact on the satisfaction of Emergency Department Services of the study hospital.

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