

CHAPTER 6

BIBLIOGRAPHY

Aday Lu ann, Shortell S. M. **Indicator and practice of health services utilization.**

In S. J. William & P.R. Torreus. (1988). **Introduction to health service.**

New York: Delmar Publisher, pp. 51-80.

There are content of conceptualization and measurement of health services utilization, analytic models of health services utilization, behavioral model of health services utilization, model of patient decision-making.

Ana D., Luis A. Lopez F., and Juan De Dios Luna., (1993). **Influence of the doctor's gender in the satisfaction of the users.** Medical Care, 31(9), 795-800.

This study discuss on the doctor's gender is a factor which has been analyzed in many studies concerning doctor-patient relations and patient relation and patient satisfaction with the health service.

Aumann G.M.E., Baird M.M. (1989). **Risk assessment for pregnant women.**

London: W.B> Saunders Company, pp. 8-31.

There are standards of prenatal care, diagnosis of pregnancy, initial prenatal care, and identification of a high-risk pregnancy which include outcome of late or no prenatal care.

Bice T.W., Rabin D.L., Starfield B.H., White K.L. (1973). **Economic class and use of physician services**, *Medical Care*, XI(4), 287-295

There is study the effects of economic class on use of physician services is discuss in detail.

Brody D.S., Miller S.M., Lerman C.E., Smith D.G., Lazaro C.G., Blum M.J. (1989). **The relationship between patients' satisfaction with their physicians and perceptions about interventions they desired and received**. *Medical Care*, 27(11), 1027-1035.

This study was designed to determine the relationship between patients' satisfaction with their physician, the types of interventions that patients reported they received, and the congruence between those interventions and the types of interventions they desired.

Carey R.G., Seibert J.H. (1993). **A patient survey system to measure quality improvement questionnaire reliability and validity**. *Medical Care*, 31(9), 834-845.

This study describes the results to develop inpatient and outpatient questionnaires that have sufficient validity and reliability to be used to measure patient perceptions of quality. The outpatient questionnaire had 7 scales; physician care, nursing care, medical outcome, facility Characteristics, waiting time, testing services and registration process.

David O., Ted G. (1992). **Reinventing government** : how the entrepreneurial spirit is transforming the public sector. (n.p.): Addison-Wesley, pp. 166-194

There are contents of customer-driven government: meeting the needs of the customer, not the bureaucracy includes getting close to the customer, and listening to the voice of the customer; customer surveys, customer follow-up, customer contact as a customers are satisfied with the unit's products and / or services, service unit customers have an opportunity to evaluate services, customer service and satisfaction in service units are continuously monitored, evaluated, measured, and used as a basis for constant improvement is discuss in detail.

Deegan A.X., O'Donovan T.R. (1982). **Management by objectives for hospital**. London: John Marozsan Publisher, pp. 3-25.

There are ideas of management, definition of MBO, as there are three elements in any system (input, action, output) “what are some of the inputs in your management system?”, “what work is done by you and your people using these inputs?”, “what are some of the outputs or results of your work activities?”

Georgopoulos B.S. (1975). **Hospital organization research: review and source** book. London: W.B. Sanders company, pp. 342-388.

(Chapter 20) There are content of multiple-concern studies of hospital organization which studies of organizational structure and functioning includes some research on hospital-environment relation, and a few studies of medical organization, studies of roles, role perceptions and interaction includes patient role and related aspects, organizational studies of psychiatric hospital includes a number of studies concerned with staff behavior and inter group relations, as well as research on the patient role and on staff-patient relations.

(chapter 21) There are contents of organizational innovation and change which is about organization-wide innovations ; ward management, service unit management, and industrial engineering innovations; service restructuring, medical, and patient care innovations; nursing service and nursing care innovations; and miscellaneous innovations (other than organization-wide) in psychiatric settings.

(chapter 22) There are contents of organizational research on operating efficiency and cost which is about efficiency of operations and services; costs and cost controls in relation to organizational efficiency.

(chapter 23) There are studies of patient care which is about quality, quantity, and evaluation of patient care; quality of medical care and physician performance;

quality of nursing care and performance; and patient perception, attitudes, and satisfaction.

Gregory J. (1978). **Patients' attitudes to the hospital service**. London: Her Majesty's Stationery Office.

It is study on the facilities for hospital outpatients and those who accompanied them, outpatient appointments and waiting to see the doctor, communication between doctors and outpatient, relationships between patients and hospital staff, note on dissatisfaction with the service.

Gronroos C. (1990). **Service management and marketing**. Lexington: Massachusetts.

There are contents of the nature of service and service quality and managing customer-perceived service quality.

Hessler R.M. Walterst M.J. (1975). **Consumer evaluation of health services: Implications for methodology and health care policy**, **Medical Care**, XIII(8) 683-692.

This paper presents the results of the application of a new model which appears to provide a link between research and health care policy formulation. Here the consumer of health services is given control over the research process,

decision- making is decentralized, and the consumer develops and applies policy recommendations based on research findings.

Hulka B.S., Kupper L.L., Data M.B., Cassel J.C., Frederic S. (1975). **Correlates of satisfaction and dissatisfaction with medical care: A community perspective.** *Medical Care*, XIII(8), 648-658

Research study on the attitude of the public toward physicians and medical service is an issue of current concern and debate. The scale was designed to measure separately the respondent's attitudes toward three distinct components of care; 1) the professional and technical competence of the physician, 2) personal qualities of the physician in his relationships with the patient, and 3) accessibility to care, including costs and convenience.

John Y. (1987). **Why are we waiting?: An analysis of hospital waiting-lists.** New York: Oxford University Press, pp. 80-81.

There are ideas to investigate the backstops and publish the results, make available existing information to the public, collect and publish information about out-patient waiting time, compensate patients for long waits.

Kaewsonthi S., Harding A.G. (1992). **Starting, managing and reporting research.**

Bangkok: Chulalongkorn University Press, pp. 17-24.

There are contents of the formulating research objectives, “what will be the research topic and objectives?”, “what should be done?”, “how can one start?”. There are ideas of the sketch of research ideas, conceptual framework, research objectives, research hypotheses, and research questions.

Kaluzny A.D., Vency J.E. **Evaluating health care programs and services.** In S. J.

William & P. R. Torrens. (1988) **Introduction to health service.** New

York: Delmar Publisher, pp. 439-453.

There are content of “what is evaluation?”, types of evaluation and implication of evaluation.

Koter D., Lipken M., Korsgaard A. (1991). **Sex differences in patients' and**

physicians' communication during primary care medical visits, *Medical*

Care, 29(11), 1083-1092

There have been a handful of observational studies investigating the influence patient sex on communication in the medical visit.

LoGerfo L.P., Brook R.H. **The quality of health care.** In S. J. William & P.R. Torrens. (1988). **Introduction to health service.** New York: Delmar Publisher, pp. 406-433.

There are content of quality assessment in health care, quality assessment methods, efficiency and provider-patient relationship, patient satisfaction and the quality of care.

Nancy F.C. (1995). **Steps to a patient satisfactions survey.** Nursing Management, 26(9), 6400-64 PP

The detail discuss on a patient satisfaction survey (PSS) is one method of collecting data about patient experiences as viewed by patients and their families. The PSS is important to document program effectiveness, both in order to qualify for resources and to attract patients However, it is not a “guest relations” questionnaire as instrument evaluates: 1) effectiveness of interpersonal relationships with professional and auxiliary staff, 2) success of technical procedures and special programs, 3) achievement of health teaching. and 4) level of satisfaction with care. Thus, the PSS is useful for both program evaluation and public relation. The following seven steps describe a process that was used to develop a PSS for a specialty unit in a general hospital: determine the need for a patient satisfaction survey, secure support of administration, collect necessary information, offer a rough draft and request feedback, pretest the PSS, administer the PSS, and analyze, interpret and present data are discuss in detail.

Pope C.R. (1978). **Consumer satisfaction in a health maintenance organization.**

Journal of health and social behavior, 19: 291-303.

This study measures for current subscribers related to each of the following dimensions: technical quality and competence, access to the system for routine care, access to the system in acute need, costs in relation to benefits, the physician-patient relationship, and patient convenience and comfort.

Rakich J.S., Longest B.B., Darr K.J. (1992) **Managing health services**

organizations. London: Health Professions press, pp.383-493.

There are contents of managerial problem solving and decision making includes problem-solving process and model, problem-solving activities, making assumption, and factor influencing problem solving and decision making which is about the situation and environmental constraints (external & internal). And there are contents of control, risk management, quality assessment, improvement and resource allocation; monitoring (control) and intervention is discuss in detail.

Stratmann W.C., Block J.A., Brown S.P., Rozzr M.V. (1975). **A study of consumer**

attitudes about health care: The control, cost, and financing of health services. Medical Care, XIII(8), 659-668.

This paper relates respondent attitudes on these subjects to attitudes about criteria that determine the respondent's choice of ambulatory care facility and to socioeconomic, political, and other demographic characteristics.

Vicker, B.C., Vickery. (1987). **Information science in theory and practice.**

London: Butterworth & Co Publishers, pp. 260-299.

It is referent of the evaluation of system. There are criteria of evaluation, a frame work for evaluation, relevance and its assessment, service qualities, evaluating performance, operational current awareness service, and perceived value of information service.

Ware J.E., Snyder M.K. (1975). **Dimensions of patient attitudes regarding doctor and medical care services.** Medical Care, XIII(8), 669-682.

It has been noted that the consumer emphasis in medical care evaluation is the result of several factors including: government support for such research, the influence of social scientists, concern about the general population, and the increasing focus on health as a quality of life.

Weiss G.L. (1988). **Patient satisfaction with primary medical care: Evaluation of sociodemographic and predispositional factors.** *Medical Care*, 26(4) 383-391

Research also has identified patient satisfaction as one of several important determinants of the utilization of medical services.

Wieland G.F. (1981). **Improving health care management: Organization development and organization change.** Ann Arbor, Michigan: Health Administration Press, pp. 327-338

There are ideas of survey feedback which include the survey feedback technique and the survey feedback process, using Likert measurement are discuss in detail.

Zastowny T.R., Roghmann K.J., Cafferata G.L. (1989). **Patient satisfaction and the use of health services: exploration in causality.** *Medical Care*, 27(7), 705-723.

It is research exists that examines the causal relationship between patient satisfaction and the use of health services concerned with the delivery of health services and important area concern as well as different way of evaluating health providers.