

UNIVERSITI TEKNOLOGI MARA

**ELUCIDATING THE IMPORTANCE
PARAMETERS IN ASSESSING
PERFORMANCE AND DESIGNING
QUESTIONNAIRE ON HOSPITAL
FOOD SERVICE**

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Thesis submitted in fulfilment
of the requirements for the degree of
Doctor of Philosophy
(Dietetics)

Faculty of Health Sciences

April 2024

ABSTRACT

In the delivery of high-quality services, healthcare organisations have become value-driven, placing equal emphasis on cost containment and quality in the food service industry. Healthcare administrators regard quality as a distinguishable, quantifiable, and amendable topic of concern. Performance improvement is important for food service organisations to increase their potential of achieving the required results and more effectively meeting the needs of customers, patients, and other service users. This research aimed to investigate the factors that impacted the quality of hospital food service and to construct a reliable and valid instrument for assessing the operations of hospital food services in Malaysia. The content and face validity of the questionnaire were determined through a process that included a literature review, semi-structure interviews with food service staffs, experts' judgement, and target user testing. The questionnaire was distributed to food service staffs in teaching, private, and government hospitals nationwide to ascertain its construct validity. The number of factors was ascertained, and determinations concerning the retention or rejection of particular items were made utilising exploratory factor analysis. Cronbach's alpha and composite reliability (CR) were employed to assess the scale's reliability. Convergent validity was evaluated using the average variance extracted (AVE) value. A total of 160 respondents participated in the survey; of these, catering officers, or assistant catering officers (59.4%) employed in a government hospital (63.1%) constituted the majority. The exploratory factor analysis confirmed the construct validity of three out of the initial five subscales. Three sub-scales comprised the remaining seventeen items (factor loadings greater than 0.50 for all item) of the questionnaire: operational management, food production and distribution management, and patient/customer service management. AVE values were greater than 0.50, Cronbach's alpha values were greater than 0.70, and CR values were greater than 0.80 for each subscale. This recently designed, user-friendly survey instrument exhibited robust construct validity and satisfactory reliability in this limited sample. The tool offered a potentially valuable instrument for staff-based evaluation of the quality of hospital food service operations and identification of areas requiring enhancement.

ACKNOWLEDGEMENT

In the name of Allah, the Most Gracious and the Most Merciful. First and foremost, I am thankful to Almighty ALLAH for giving me the strength, knowledge, ability, and opportunity to undertake this study and complete it satisfactorily. Alhamdulillah.

I would like to express my deep and sincere gratitude to my research supervisor, Assoc. Prof. Dr. Norazmir Md Nor for giving me the opportunity to do research and providing invaluable guidance throughout this research. His dynamism, vision, sincerity, empathy, and motivation have deeply inspired me. It was a great privilege and honour to work and study under his guidance. I am extremely grateful for what he has offered me.

I am thankful to Assoc. Prof. Dr. Mohd Shazali Md Sharif, Dr Syahrul Bariah Abdul Hamid, and Dr Syafiqah Rahamat for their contribution and guidance throughout my research work and completing my thesis. My special thanks to my colleagues for their support and people who participate and contribute to this research work.

I am extremely grateful to my parents, the late Mr Osman Mat and for her love, prayers, caring and sacrifices for educating and preparing me for my future. I am very much thankful to my siblings, sisters and brother in-laws, family and friends for their prayers and continuing support throughout my journey. Finally, my thanks go to all the people who have supported me to complete the research work directly or indirectly.

In loving memory of

My inspiration, my hero, my beloved father,

“We pray that Allah S.W.T in His Infinite Mercy will grant Allahyarham manifold blessing and forgiveness and that Allah S.W.T will include his soul as one who is deserving of His Clemency and Rewards in Al-Jannah, Ameen. Al-Fatihah.”

and

My star, my ‘Moon’ who shines the brightest,

“When I’m alone, you’re like a dream, it took away the fear was inside me ...”

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CHAPTER 1

INTRODUCTION

1.1 Research Background

Patient meals are necessary for hospital care, and a balanced diet is critical for rehabilitation. While hospital food is typically focused on managing malnutrition, patients' meal experiences have become an essential emphasis, mostly since hospital food is supplied as part of the hospital service (Andersson et al., 2013). Hospital meals are essential for a patient's recovery and well-being, as they aid patients physically and emotionally during their hospital stay (Al-torky et al., 2016). The purpose of hospital food service is therefore to offer inpatients nourishing meals that are beneficial to their health and recovery, as well as to serve as an example of healthy nutrition by providing a menu suited to each patient's situation. The primary objective of a hospital food service is met when meals are meticulously planned and tailored to satisfy the specific dietary requirements of individual patients (Dall'Oglio et al., 2015). Hospital menus should be planned according to patients' preferences focusing on variety, quality, and taste, as well as the hospital's environment and pleasant assistance of nursing staffs (Messina et al., 2013).

Malnutrition is a typical result of failing to provide appropriate nutrition to hospital patients, which can delay their recovery, increase their risk of complications, and lengthen hospital stay (Agarwal et al., 2013). Every patient has the right to expect that the food served in the hospital will aid their recovery and maintain their nutritional status. Furthermore, patients who are well-nourished upon admission have the right to maintain their current nutritional condition after discharge (Zahran & Bakr, 2021). Reduced food intake is caused by various factors, including poor food quality or inappropriate food selection, a lack of mealtime support, and staff failure to recognise undernutrition (Vijayakumaran et al., 2018). Some other reasons include the dietitian and hospital's failure to provide adequate resources for staff training and a pleasant dining environment (Hartwell et al., 2013; Walton et al., 2013). It is commonly acknowledged that food and other aspects play a significant role of a patient's hospital stay and that healthcare personnels are responsible for providing proper meals to