

A Study on SERVQUAL of Private Hospitals at Coimbatore

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ABSTRACT

Quality of hospital services becomes the utmost concern for the patients. Patients want to avail good quality services from the hospital service providers. In order to provide good quality service, thereby satisfying and retaining the patients, hospitals are striving to measure and maintain service quality. This study reveals the gap between the expectation and perception of hospital services have been found out and the study suggested some strategies to overcome the gap. The study focussed on the service quality parameters and the method chosen for the research is Descriptive design. The study is based on the primary data and data has been collected from in-patients by well framed questionnaire. The sampling technique used in the study is Random sampling where the sampling size comprises of In-patients in order to test their satisfaction and expectation level. The sample size is of 150 for this study. The tools applied to analyse the data were percentage analysis, F test, T test, and ANOVA.

Keywords: Service quality, SERVQUAL, Patient expectations, Behavioural Intention, Perception of Hospital service, Expected level of Hospital services

INTRODUCTION

"Service Quality," an idea portrayed as subtle and dynamic by analysts in Parasuraman et al. (1985). From the tolerant point of view, Service quality incorporates impression of medicinal consideration additionally such apparently bind worries as physical offices, connections with both therapeutic and paramedical staff. Service quality has been characterized by different scientists in assorted ways

Quality has become the essential parameter to be evaluated for a product or service which is to be purchased or consumed. The same way, patients are comparing and evaluating the service quality of both private and public hospitals. Due to the technological advancements and continuous efforts towards the research and development in the field of medicine, many private players readily provide excellent health care services. Hence there exists hyper competition among the private health care service providers. Quality has become the major concern for both the patients and the researchers in the hospital industry.

Quality of hospital services becomes the utmost concern for the patients. Patients want to avail good quality services from the hospital service providers. In order to provide good quality service, thereby satisfying and retaining the patients, hospitals are striving to measure and maintain service quality. Quality is the differentiator which differentiates a service provider from others. Though hospitals provide similar services with varying degrees of quality, it has become one of the differentiating factors which establish a distinctive advantage. Patient's satisfaction and retention are the results of good quality health care services. Thus, the satisfied patients would show their loyalty; in turn, it results in good behavioural intention.

It has become mandatory for the hospital service providers evaluate the quality of their services. The patients would be satisfied when their expectations are met. Otherwise, they derive dissatisfaction. Once

the service delivery process gets completed, the service providers must monitor how well the patients' expectations and the way they are met.

The service quality utilizing a multi-thing scale called SERVQUAL, it is designed to capture the patient expectation and perception of service along with five service measurements of tangibles, reliability, responsiveness, assurance, and empathy. The SERVQUAL questionnaire consists of 22 expectation items and 22 perception items. Both the expectations component and the perceptions component of the questionnaire consist a total of 22 items, comprising 4 items to capture tangibles, 5 items to capture reliability, 4 items for responsiveness, 4 items for assurance and 5 items to capture empathy. They declare that the SERVQUAL things speak to centre assessment criteria that rise above particular organizations and commercial ventures, giving a fundamental skeleton basic service quality that can be supplemented with connection particular things when needed. The service quality model "SERVQUAL" positions as the most essential of the models. It depends on the supposition that service quality is an element of contrasts between patients' desires and recognitions along five quality measurements.

OBJECTIVES OF THE STUDY

1. To study the factors influencing service quality of the hospital.
2. To know the patient's expectations towards hospital services.
3. To analyse the category of hospital that patient's prefer for treatment.
4. To suggest ideas to improvise the service quality of the hospital

SCOPE OF THE STUDY

The main focus of the study is to identify the effect of the service quality dimensions of hospital on patient's satisfaction and their behavioural intentions in the study area.

LIMITATIONS OF THE STUDY

1. The opinion study is confined only to the hospitals at Coimbatore. Thus, the findings of the study may not be fully applicable to all the private hospitals in Coimbatore.
2. The focus of the study is on the hospital industry. Hence generalization of the results and findings cannot be done for all the service industries.
3. The Study is limited to only 150 samples so the results are based on the same.

REVIEW OF LITERATURE

Semabehdioglu, Eylem Acar et al. (2019),

In this study, the quality of services in Yoncalı Physiotherapy and Rehabilitation Hospital in Kutahya, Turkey is evaluated.. SERVQUAL questionnaires (which include 22 items within 5 dimensions) were applied to 262 patients so as to get patients' perceptions of provided services.. Results denoted the negative gap for all items, that exhibits a general dissatisfaction from the service provider. Particularly, the very best gap score was in tangibles dimension and this is often followed by responsiveness, reliability, assurance and empathy.

Mohamad Reza Mohammadi-Sardo (2019),

The quality of medical services and attention paid to patients in medical centers have been concerning for healthcare providers. The present study was designed to spot factors affecting patient satisfaction with medical service within the emergency department (ED). This was a study conducted on 2016 in Imam Khomeini Hospital, Jiroft, Iran. Patients aged quite 18 years presenting to the ED with a minimum stay of 24 hours were included. The study employed 373 patients with the minimum age 18 and maximum of 79 years, of whom, 67 were men. The scores indicate the extent of patient satisfaction with the hospital service starting from relatively satisfied to totally satisfied.

Hashemi, Fatemeh and Nosrat et al. (2018)

The quality of hospital services was improved compared to previous years. The highest and the lowest mean were related to "Tangibles" (4.04±0.58) and "Empathy" (3.84±0.46), respectively. There was a significant relationship between service quality and gender (P=0.01) and educational level (P <0.001). Healthcare managers should use the results of such studies to plan and allocate optimal hospital resources and increase the quality of their services. Should improve the level of patients' satisfaction by directing resources towards areas affecting patients' perception and experience.

Hashemi F, Avaznejad N et al. (2017),

A service quality dimension named “trust in services” was found using EFA, which is not an original SERVQUAL factor. The approach was applied to assess the hospital’s service quality. Since the PSQI value was 0.76 it showed that improvements are needed to satisfy customer expectations. The results exhibited the factor order that affect PSQI.

RESEARCH METHODOLOGY

Research methodology is widely used as a way to solve the research problem. Research methodology refers to various steps adopted by the researcher to study the problem with objectives.

RESEARCH DESIGN:

The research design is **descriptive** as it is based on a survey conducted among patients in the hospital.

SOURCE OF DATA:

The primary data and secondary data were used for the study.

PRIMARY DATA:

A well framed Questionnaire was employed to collect the Primary data from Patients

SECONDARY DATA:

Secondary data was collected through Books, Journals, Magazines, Publications, Websites, Hospital information records.

DATA COLLECTION INSTRUMENT:

The instrument used for data collection is questionnaire. An Interview schedule was administered to collect the primary data SIW, (SERVQUAL Importance Weights).

Five dimensions in SERVQUAL are Tangible (1-4), Reliability (5-9), Responsiveness (10-13), Assurance (14-17), Empathy (18-22)

MODE OF DATA COLLECTION:

The mode of data collection is interview schedule method.

SAMPLING METHOD:

Systematic random sampling - This is a type of probability sampling method in which sample members from a larger population are selected according to a random starting point but with a fixed periodic interval.

SAMPLE UNIT: The sample unit is In-patients.

SAMPLE SIZE: 150 is the sample size.

DATA ANALYSIS, INTERPRETATION AND FINDINGS

SIMPLE PERCENTAGE ANALYSIS

TABLE 1 KNOWLEDGE SOURCE ON DEMOGRAPHIC DATA

S.no	Variables	Categories	Frequency	%
1.	Gender	Male	96	64.0
		Female	54	36.0
2.	Age	Below 20	24	16.0
		21-40	35	23.0
		41-60	41	27.0
		Above 60	50	34.0
3.	Education	Below SSLC	20	13.0
		SSLC	23	15.0
		HSC – DIPLOMA	27	18.0
		UG	59	40.0
		PG	21	14.0
4.	Marital Status	Married	108	72.0
		Unmarried	42	28.0
5.	Occupation	Farmer	13	9.0
		Private employee	39	26.0
		Govt. employee	5	3.0
		Business	33	22.0
		Others	60	40.0
6.	Income	Below 5000	22	15.0
		5001-15000	56	37.0
		15001-25000	43	29.0
		25001-35000	21	14.0
		Above 35000	8	5.0
7.	Length of Stay	1 Day	5	3.0
		1-3 Days	50	33.0
		4-6 Days	55	37.0
		Above 6 Days	40	27.0
8.	Location	Below 5 minutes	10	7.0
		6-10 minutes	14	9.0
		11-15 minutes	19	13.0
		16-20 minutes	8	5.0
		Above 20 minutes	99	66.0
9.	Treatment	General check-up	31	21.0
		Fever	1	1.0
		Cardio related	23	15.0
		Gynaec related	2	1.0
		Ortho	93	62.0
10.	Expenditure	Below 5000	61	40.0
		5000-10000	55	37.0
		Above 10000	34	23.0

Interpretation about Demographic data

1. The above table indicates that majority of the patients were Male with 64% and 36 % of the patients were Female.
2. In this study age of the patients interpreted in that above 60 are 34% and between 41-60 were 27% and between 21-40 were 23% and finally the least was below 20 with 16% of the patients in the hospital.
3. The Study revealed that under graduate patients were 40%, HSC-diploma with 18 %SSLC with 15% and with post-graduation with 14% and finally the least was below SSLC with 13% of the patients in the hospital.
4. The study shows majority of the patients were married with 72% and unmarried with 28 % in the hospital.
5. The study clearly shows that occupation of patients who does other jobs like workers and daily wage earner were 40%, private employees with 26%, doing business with 22%, farmers with 9% and the least was found to be government employees with 3%.
6. It is clear that most of the income of patient's family were between 5001-15000 with 37%, between 15001-25000 with 29%, below 5000 with 15%, between 25001-35000 with 14% and the least was above 35000 with 5%.
7. The study shows that the majority of patients who has length of stay were between 4-6 days with 37%, 1-3 days with 33%, above 6 days with 27% and finally the least was 1 day with 3% of the patients of hospital.
8. It clearly shows that majority patients were above 20 mins with 66%, between 11-15 mins with 13%, between 6-10 mins with 9%, below 5 mins with 7% and the least was 16-20 mins with 5% of the patients in the hospital.
9. The study shows that majority of patients get treated for the Ortho cases with 62%, for general check-up with 21%, and Cardio related treatments with 15%.
10. From this demographic data we could come to know that majority of the patients do their expenses below Rs.5000 with 40%, between 5000-10000 with 37% and nearly 23% of patients spend above Rs.10000.

**TABLE 2:T-TEST
T TEST USING GENDER AND EXPECTED LEVEL OF HOSPITAL SERVICES**

Particulars	Gender	N	Mean	Std	T	Df	Sig.	Remarks
Visually appeal of Physical facilities	Male	96	3.61	0.622	2.881	148	0.002	Accepted
	Female	54	3.33	0.472	3.102	134.5		
Clean and comfortable environment of hospital	Male	96	3.53	0.615	1.458	148	0.004	Accepted
	Female	54	3.39	0.492	1.551	130.711		
Sincere interest in solving the problems	Male	96	3.36	0.682	1.968	148	0.000	Accepted
	Female	54	3.17	0.376	2.290	147.9		

**TABLE 3.1- ANOVA TEST
ANOVA TEST USING AGE AND PERCEPTION OF HOSPITAL SERVICE**

		Sum of Squares	df	Mean Square	F	Sig.	Remark
Talented Doctors / Nurses	Between Groups	5.97	4	1.494	2.964	0.022	Significant
	Within Groups	73.096	145	0.575			
	Total	79.073	149				
Availability of 24 hours service	Between Groups	19.145	4	4.786	3.039	0.019	Significant
	Within Groups	228.355	145	1.575			
	Total	247.500	149				
Polite and friendly dealing of patients	Between Groups	22.255	4	5.564	5.297	0.001	Significant
	Within Groups	152.285	145	1.050			
	Total	174.540	149				

**TABLE 3.2- ANOVA TEST
ANOVA TEST USING AGE AND BEHAVIOURAL INTENTION**

		Sum of Squares	df	Mean Square	F	Sig.	Remark
I will say positive things about the Hospital	Between Groups	5.939	4	1.485	2.448	0.049	Significant
	Within Groups	87.934	145	0.606			
	Total	93.873	149				
I will recommend any one about the Hospital	Between Groups	10.483	4	2.621	4.172	0.003	Significant
	Within Groups	91.091	145	0.628			
	Total	101.573	149				

TABLE 4 – F TEST

Service	Mean Rank
Location	3.35
Quick recovery	3.41
Service Quality	3.43
Tariff charges	3.47
Brand name	3.67
Referred	3.68

Interpretation on T, F and ANOVA TEST

1. The significant value of Visually appeal of physical facilities, Clean and comfortable environment of the hospital, Sincere interest of personnel in solving problems are found to be 0.002,0.014,0.000 in which it is lesser than 0.05. Hence for all these statements the alternative hypothesis can be accepted. This means that there is a significant difference between gender with respect to expected level of hospital services
2. The significant value of Talented doctors/nurses, Availability of 24 hours service, Polite and friendly dealing of patients are found to be 0.022, 0.019, 0.001 in which it is lesser than 0.05. Hence for all these statements the alternate hypothesis can be accepted. This means that respondent belonging to different age on an average don't have same perception of hospital services.
3. The significant value of I will say positive things about hospital to other people, I will recommend the hospital to anyone who seeks my advice are found to be 0.049,0.003 in which it is lesser than 0.05. Hence for all these statements the alternate hypothesis can be accepted. This means that respondent belonging to different age on an average don't have same behavioural intention.
4. Patients has rated location as a first criteria with a factor of 3.35, patients has rated quick recovery as a second criteria with a factor of 3.41, patients has rated service quality as a third criteria with a factor of 3.43, patients has rated tariff charges as a fourth criteria with a factor of 3.47, patients has rated brand name as a fifth criteria with a factor of 3.67 and patients has

rated referred doctor as a sixth criteria with a factor of 3.68.

DISCUSSION / SUGGESTIONS

1. Providing service at appointed time is challenging task because of insufficient doctors under the same specialization, it is been noticed in the perception of the hospital services as age is not the criteria to judge the Doctors talent. We can introduce the token system (queuing) those who come without prior appointment to minimize the waiting time for the Doctor.
2. Based on the demographic data analysis it shows that majority of patient's income who take treatment in the hospital are below 15000/-and maximum patients were from low wage sector. The hospital management can go for empanelment from various companies or industries to cater their employees' health needs.
3. By the F test we clearly understand that patients who come from the treatment need quick service. So, hospital can computerize the procedure for discharge summary incorporating digital signatures for easy discharge process and a quick service
4. The patients belonging to different age on an average don't have same behavioural intention so suggestion is to enhance the infrastructure to attract patients who come for treatment of different age sectors. Like for example for paediatric we can specially provide a small indoor park where children who come for treatment can enjoy their length of stay in the hospital.
5. As a Retention policy the hospital management can provide career enrichment or enhancement programmes for hospital employees as a training so as to improve the approach of employees towards patients.

CONCLUSION

Patients' intention to avail the hospital services is the major concern for

the hospital service providers. Even though the cost of service is high in private sector people prefer to go private hospitals because of favourable perception of reliability and tangibility. The hospital that provides better service will be getting more patients. In some items of service quality, perception is slightly less than expectation of patients like providing service at appointed time, accuracy of medical reports to be maintained and ease of admission. It does not mean patients are expecting more. Rather it means that their satisfaction has not matched their expectation. Hospitals, both in public and private sector, need to concentrate on augmenting the facilities including modern equipment's.

However, the facilities provided should be need based and hospitals have to bear in mind that mere availability of facilities will not work in their favour. Availability of qualified doctors to make use of the facilities for treatment is equally important. It is in this context; the private hospitals are able to take on the government hospitals. The study confirms that it is the treatment and availability of specialist is the leading factors when it comes to choose of hospital for an individual. So, every hospital should work to create a favourable public opinion. The research explores quality of service given by the hospital in order to satisfy needs of patients which is a social concern. Therefore, the hospitals should maintain their quality and to provide a good facility for the welfare of society.

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