

A Service Quality and its Influence on Customer Satisfaction in a Multi-Speciality Hospital

A.S. Sathish, R. Indradevi, Sreeram Gangineni

Abstract: *Objective: The objectives of this paper is to assess the quality of services offered by multi-speciality hospital suffice patient satisfaction. Also to bring out the various factors that creates patient satisfaction. Further to evaluate the aspects relating to expectation, perception and satisfaction of the services provided by the hospital.*

Purpose: *The purpose of this paper is to examine service quality in multi-speciality hospital in a town where fast mushrooming of private hospitals are at large in South India, India. Specifically, this study examines the five dimensions of SERVQUAL instrumentation (reliability, assurance, tangibles, empathy, and responsiveness) with respect to customer satisfaction of the services offered by the hospital. A comprehensive service quality measurement scale (SERVQUAL) is empirically evaluated for its potential usefulness in a Multispecialty Hospital.*

Findings: *The patients showed positive response on the service quality variables and do have high agreement levels of the dimensions of SERVQUAL. Service quality has emerged as the highest expected aspect by the patients at the hospital.*

Research limitations: *The research scope registered only patients experiences, (respondents) and experiences observed at the time of study.*

Practical Implications: *The study provides a new understanding of SERVQUAL dimensions in the context of a multi-speciality hospital in a place where these services are provided and offered with a differentiation. Thus provides an understanding of these dimensions and its role in making the organisation stand out among the intense competition and sustain in the long run.*

Keywords: *Service Quality, Patients, Customer Satisfaction, and multi-speciality hospital.*

Paper type: *Research paper.*

I. INTRODUCTION

Healthcare is one of the India's largest sectors - both in terms of revenue and employment. Healthcare includes hospitals, medical devices, clinical trials, outsourcing, telemedicine, medical tourism, health insurance and medical equipment. The Indian healthcare sector is growing at a brisk pace due to its strengthening coverage, services and increasing expenditure by public as well private players. The private sector provides majority of secondary, tertiary and

quaternary care institutions with a major concentration in metros, tier I and tier II cities⁽¹⁾.

Putting the patient first is a challenge that requires not just a more change in the mind-set of all the holders in health care sector, but also means by which to measure the levels of satisfied patients, and discover the various factors leading to that, during and before their visit to any hospital. Patient quality initiatives with their softer, experiential focus, qualified doctors, skilled staff, needs a precautionary scientific measurement techniques in understanding the patient satisfaction aspects and quality levels.

Customers perceive the services in terms of quality service and satisfaction by experience. Service quality is critical element in shaping customersatisfaction. Services thatare offered in the combination of physical product, service quality and satisfaction is also be very critical in responding to customer satisfaction.

II. LITERATURE REVIEW

The ever growing population and increasing standards of living of people have determined significant growth within the global healthcare services sector, as consumers have demanded better medical care to support their standards of living. In the light of the above literature reveals that there is a positive relationship exists between service quality and satisfaction. Weitzman (1995)⁽²⁾ suggested that health care quality is defined in relationship to (1) the technical aspects of care, (2) the interpersonal relationship between practitioner and patient, and (3) the amenities of care. Hence the current study tries to understand the role of service quality and the aspects leading to satisfaction of patients visiting the hospital. Andaleeb (1988)⁽³⁾ opined that those hospitals that fail to understand the importance of delivering customer satisfaction may be inviting possible extinction. Service quality always received special attention from the service marketers because it was within the control of the service provider and continuous improvement of service quality certainly influenced customer satisfaction and buyer's intention to purchase the service. Hence delivering quality service is pivotal to drive satisfaction. As production and consumption of the services occur simultaneously, strategies that acknowledge the importance of the consumer must always be integrated into the hospital healthcare delivery system process⁽⁴⁾ The base for the SERVQUAL scale is the gap model proposed by Parasuraman, Zeithaml and Berry (1985, 1988)^(5&6). Service quality is not a monolithic concept and leans on several dimensions with varied importance to overall service quality, and their impact on patient's satisfaction⁽⁷⁾.

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*Correspondence Author(s)

A.S. Sathish, Associate Professor, VIT Business School, VIT University, Vellore (Tamil Nadu), India.

R. Indradevi, Associate Professor, VIT Business School, VIT University, Vellore (Tamil Nadu), India.

SreeramGangineni, Student, VIT Business School, VIT University, Vellore (Tamil Nadu), India.

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Rohini and Mahadevappa (2006)⁽⁸⁾ applied SERVQUAL framework and SERVQUAL factors in their study on Bangalore (India) hospitals.

The study concluded with the existence of an overall gap between patient's perceptions and expectations and also between the management's perception of patients' expectations and patient's expectations.

Pakdil and Harwood (2005)⁽⁹⁾ considered patient satisfaction in a pre-operative assessment clinic and the outcome of the study showed that patients were most dissatisfied with the waiting time and recommended the hospitals should provide prompt services and provide waiting rooms or halls with news dailies, magazines and television sets to make patients more comfortable during their wait.

Finally positive physician patient satisfaction increased patient satisfaction more than any other provider of customer relationship.

Managers and professionals contend that patients perception of quality in health care is not accurate, because of the inability of patients to analyse and judge the technical competence of the medical practitioners with accuracy and it would be highly appreciable to impart soft skill training to enable them to get close to their patients and create the closeness of the treatment rendered to patients⁽¹⁰⁾

Managing service processes has a very special importance in service industry as it offers a process for delivering services and patient satisfaction with the quality of care rendered.

Effective service offering creates unique customer experiences, which would make the consumers use the services repeatedly⁽¹¹⁾

Interaction of hospital staff with the customers visiting the service setting effects the perceptions of service quality and hospitals need to ensure that the front end and back end processes are aligned in a sequence that demonstrates positive moments of truth in service quality dimensions followed and thereby impacting the satisfaction of patients⁽¹²⁾.

Consumer satisfaction is consumer's response to the evaluation of the perceived inconsistency between prior expectations and the actual performance of the product or service after consumption.⁽¹³⁾ Consumer's satisfaction acts as a guide for monitoring and improving the current and potential performance of any business⁽¹⁴⁾.

We strongly believe that patient satisfaction have to find its way in designing of services in a industry where services are dominant. Because of the relationship between perceived service quality and satisfaction.^(15&16) This study addresses two major research objectives:

III. METHODOLOGY

Research Description

Table 1: Research Description

Research type	Descriptive Research
sample size	485
Sampling type	Non-probability convenience sampling
Data collection techniques	Structured questionnaire survey
Data Interpretation tools	Microsoft Excel and SPSS 21.0

Sampling Method

The study collected data from 515 samples and 30 samples were disregarded due to incomplete data. Structured questionnaire survey was used to collect data from the respondents Non-probability convenience sampling method was deployed to collect from respondents who visited the hospital. Data was collected inpatients and from the accompanied persons who came along with the patients.

Statistical analysis: Microsoft Excel and SPSS 21.0 were used for analysis and interpretation.

Descriptive statistics, correlation and regression analysis was conducted and the results were discussed.

IV. DESCRIPTIVE STATISTICS

Gender

Table 2: Descriptive Statistics

	Frequency	Percent	Valid Percent	Cumulative Percent
Male	215	44.3	44.3	44.3
Female	270	55.7	55.7	100.0
Total	485	100.0	100.0	

The descriptive statistics indicates the percentage/share of male and female contributed to the survey.

In which Male indicate Percentage i.e. 44.3% (215 out of 485) and Female indicate percentage i.e. 55.7% (270 out of 485).

Table 3: Correlation Analysis

		TANGIBILITY	RELIABILITY	RESPONSIVENESS	ASSURANCE	COURTESY	EMPATHY
TANGIBILITY	Pearson Correlation	1	.815**	.800**	.703**	.689**	.613**
	Sig. (2-tailed)		.000	.000	.000	.000	.000
	N	485	485	485	485	485	485
RELIABILITY	Pearson Correlation	.815**	1	.809**	.707**	.681**	.623**
	Sig. (2-tailed)	.000		.000	.000	.000	.000
	N	485	485	485	485	485	485
RESPONSIVENESS	Pearson Correlation	.800**	.809**	1	.773**	.759**	.681**
	Sig. (2-tailed)	.000	.000		.000	.000	.000
	N	485	485	485	485	485	485
ASSURANCE	Pearson Correlation	.703**	.707**	.773**	1	.781**	.678**
	Sig. (2-tailed)	.000	.000	.000		.000	.000
	N	485	485	485	485	485	485
COURTESY	Pearson Correlation	.689**	.681**	.759**	.781**	1	.774**
	Sig. (2-tailed)	.000	.000	.000	.000		.000
	N	485	485	485	485	485	485
EMPATHY	Pearson Correlation	.613**	.623**	.681**	.678**	.774**	1
	Sig. (2-tailed)	.000	.000	.000	.000	.000	
	N	485	485	485	485	485	485

Correlation

Correlation analysis was used to find the relationship between the SERVQUAL variables. The results revealed that all the relationship were positive with the significance level of 0.000 which is less than the required 0.05 (17). The strongest relationship and the weakest were tabulated

Regression Analysis

The regression analysis is carried on independent variables i.e. tangibility, reliability, responsiveness, assurance, courtesy and empathy on dependent variable being customer satisfaction. The significant value is to less than 0.05 to be qualified/ accepted for every variable and hence there would a positive influence on independent variables.

Table 4: Regression Analysis

		Coefficients			T	Sig.
Model		Unstandardized Coefficients		Standardized Coefficients		
		B	Std. Error	Beta		
1	(Constant)	3.535	.193		18.331	.000
	TANGIBILITY	-.048	.008	-.048	-.554	.580
	RELIABILITY	.025	.008	.027	.309	.758
	RESPONSIVENESS	.095	.009	.101	1.056	.029
	ASSURANCE	.116	.007	.125	1.518	.030
	COURTESY	-.104	.008	-.117	-1.306	.192
	EMPATHY	.038	.006	.044	.589	.556

a. Dependent Variable: SATISFACTION MEASUREMENT

There is a significant influence of responsiveness and assurance on satisfaction measurement. The independent variables i.e. responsiveness and assurance have a significance value of 0.029 and 0.030 which is less than

0.050. The other variables such as tangibility, reliability, courtesy and empathy were insignificant in influencing the dependent variable customer satisfaction.

V. DISCUSSIONS

The study had more of female respondents with 270 being female and 215 out of the 485 are male. The respondents have stressed the importance of high expectations of each and every criterion of SERVQUAL dimensions. All the correlation relationship texted between the all variables of service quality has positive relationship with each other. The correlation relationship among tangibility, reliability, assurance, responsiveness and empathy dimensions is highly positive.

The relationship between reliability and tangibility has a strong positive correlation with correlation value of 0.815. This is the strongest relationship among the variables tested. The relationship with lowest value was between empathy and tangibility which is 0.613. The relationship is strongly correlated.

The regression analysis shows that responsiveness and assurance has an impact on satisfaction of the customer. All the other independent variables don't show any impact on the dependent variable. Assurance has the strongest influence than responsiveness on satisfaction.

VI. LIMITATIONS

The sample was selected from only one health care facility. Individual's response was declined if the patient didn't patronage in the hospital. The study suffers from response error as earlier studies. It must be noted that despite our meticulous care the survey have response bias. Language barrier was present which the researchers worked to overcome. The study needs to be extended to be generalized in other health care sectors. It is possible for the study to be generalized if the study is conducted in few more hospitals across geographical area.

VII. SUGGESTIONS

The main aim of hospital is to cure, care, access component and the physical environment. It is important that the hospitals concentrate on the responsiveness and assurances component of services quality. Assurance in a hospital environment should be the utmost concentration.

Assurance of good service and care in an environment of life and death goes long way in promoting the hospital. Responsiveness will make the customers feel safe and secure thus promoting high reputation. It is the management and all the stake holders' duty to provide assurance and instil a feeling of responsiveness from their part. All the component of SERVQUAL must be concentrated to provide world class service. Our study also suggests that the waiting time needs to be decreased in order for the patients to feel satisfied. E-services need to be given an easy user interface. Parking should be well maintained. Physical queue in hospital needs to be short. But at the end of the day quality plays the major role in hospital sector for satisfying the customers.

VIII. CONCLUSION

In the current research, all the service quality dimensions such as tangibility, reliability, responsiveness, assurance, courtesy and empathy are important in creating customer satisfaction in a multi speciality hospital. Other than responsiveness and assurance, no other variables have any significant association with customer satisfaction. The other variables like tangibility, reliability, courtesy and empathy need to be given special attention

Therefore it's in the hands of the hospital staff to create and ensure responsiveness and assurance for the patience among themselves. They need to take the response for the actions of the hospital and strive to improve it. All the treatment related details needs to be disclosed to the patients and relatives. It creates an environment where the staffs take responsiveness for patients. So, patients feel trusted with the products and services offered in this hospital.

Staff must be trained to answer all the questions and induce trust on them and the hospitals. Hospital Staff ought to be considerate amid confirmations technique and to be well mannered amid housekeeping process. Staffs need to be eager in helping the patients and their relative. They must develop a rapport and exude positive personality.

Ethical clearance- Taken from Hospital Management

Source of funding- Self

Conflict of Interest - Nil

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