ORIGINAL RESEARCH PAPER

Management

'A study on patient's expectation and perception about service quality in Basaweshvara Hospital of Gulbarga'

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ABSTRACT

A quiet revolution is talking place in hospital administration in India. The changing scenario of increasing customer expectations, customer demand, a variety of quality healthcare, the entrepreneurial spirit and professionalized management have compelled the private hospitals to adoptstrategies to gain competitive edge ever each other which ultimately result in the creation of satisfied customers. Service Quality perception is the buzzword in today's highly competitive and rapidly fluctuating business domain. Service Quality is a strategy used to learn more about the customer's needs and behaviours in order to develop stronger relationships at the heart of a successful business. Organizations find that all business processes from customer service to payroll have an impact on the end user. Service Quality Perception helps the service users to achieve the goals of Customer expectation from the health care industry and Customer perception from the health care industry.

INTRODUCTION:

Healthcare is a patient oriented service industry where the patient or the service users is in focus and patient service is the differentiated factor. Success and survival of healthcare organi sation depends upon the effectiveness and efficiency of the services rendered to its patients. Patients' satisfaction is the key to secure patient retention/loyalty and to generate superior and long-term performance or optimize long-term value. This patient perception is based on their expectations and perceived in the services offered by the healthcare industry.[1]

The term service quality has been defined in several ways. Parasuraman et al. (1985) describes the word service quality as a measure of the degree of discrepancy between consumers' perceptions and expectations. Consumer dissatisfaction occurs when expectations of the consumers are greater than actual performance of service delivering organizations and perceived service quality is less than the satisfactory level.[2]Gronsroos (1984) defines service quality as a function of expectations, outcome and image. Today most of the researchers,academicians ,managers ,practitioners concern with service sector are mainly focusing on service quality which is one of the important factor for achieving success in business through customer satisfaction, customer retention, customer loyalty and profitability. Still it is not possible for researchers to propose generic definition service quality which will be applicable for all service sector. This is because of the characteristics of services which are intangibility, heterogeneity, inseparability and perishability. All over the world still researchers are trying to define ,measuring service quality for various service sector. The meaning of quality for individual to individual is different, it depends on various factors such as culture, environment, socio-economic conditions ,demographic factors . Most of the research on service quality are carried out in developed countries because of their early awareness about the importance of service sector in economy of the country. To achieve success in business ,it is important to know the concept of service quality , the factors influencing service quality . Various researchers has proposed the service quality models to understand the concept of service quality, to provide the direction for improvements.[3]

SIGNIFICANCE AND SCOPE OF THE STUDY

India's health care sector has made impressive strides in the recent years and the expectations of the people have risen greatly. The services have also increased and the patients expect qualitatively better and timely services from the hospital. There is a growing need for quality hospital services to satisfy the patients.[4]Hence, the evaluation of patient perception has become a need of the time. This helps the marketers in bringing out adequacies and inadequacies in a hospital and paves ways for innovative efforts. Besides understanding and satisfying inefficiently satisfied needs

marketers also strive to identify the unfelt needs of the patients, make the patient aware of the need and satisfies the need more efficiently than the competitors. Competitive quality creates satisfied patients.

REVIEW OF LITERATURES

Liz Gill, Lesley White (2006)[5]evaluates studies of service quality in healthcare, recognizing extra key domains. Total of 36 related studies of service quality have been evaluated, only three have gone well beyond the SERVQUAL model and five have deployed entirely diverse approaches. Based on considerations from the evaluated studies a model is proposed to include those recognized key domains to measure service quality of healthcare. In the public health sector the independent variables which are suggested to determine service quality are Reliability, Responsiveness, Assurance, Joint Decision Making, Caring, Risk, Continuity, Collaboration, Outcome, Empathy, and Tangibles.

Syed Muhammad Irfan (2011)[6] aimed to evaluate the service quality delivered by the private hospitals in Pakistan which was literally based on patient perception. A questionnaire was developed based on SERVQUAL model comprised of 22 variables representing five service quality dimensions; empathy, tangible, assurance, timeliness and responsiveness. The target population of this study was the employees working at officer level in the service organizations and availing healthcare services including consultation and in-patient from the best private hospitals in the city, Lahore of Pakistan. A total 320 respondents considered for the study. The results of the study indicate that service quality in private hospitals is meeting patients satisfactions i.e. private hospitals are delivering better healthcare services. Results of the five factors showed that the measurement model for service quality constructs had a good fit and the model is valid and reliable.
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OBJECTIVES OF THE STUDY

1. To ascertain the customer expectation and perception about customer service in order to find out the gaps.

RESEARCH METHODOLOGY

In order to study the satisfaction of patient and his attendants about the service provided by the Basaveshwara hospitals in Gulbarga District, the primary data were collected from patients by using Interview schedule.

Therefore totally 720 respondents were selected. As majority of the respondents were not highly educated, the schedule was mostly filled by the researcher. In some cases, where the respondents were highly literate, they filled the schedule themselves. If the patients were unable to fill the schedule their attendants helped to fill it. In this study, disproportionate stratified

sampling was administrated. In order to assess and evaluate the quality of service provided to the patients, the following dimensions were taken for evaluating service quality of health care and satisfaction level of patients towards the healthcare services in the present study. The important dimensions are responsiveness, competence, reliability, empathy, courtesy, access,communication, security and physical environment.

Area of the Study
The area of the study is conducted in the Gulbarga district. Study area coverdGulbarga,Sedam,Aland,Abzalpur,Jewargi,Chittapur and Chincholi.

Sample Design
The study is conducted under disproportionate stratified random sampling method.

Sample Size
In the sampling methods 720 patients were selected as samples by interview schedule method.

Source of the data
The researcher has collected the data from both primary and secondary.

Primary Data
In order to fulfil the set objectives a sample study was undertaken by using a well framed interview schedule that was duly filled in by the respondents.

Secondary Data
The secondary data pertaining to the study was gathered from well equipped libraries in Gulbarga university and Central University of Karnataka and from Internet web resources. Further, the secondary data were also collected from various leading journals inclusive and exclusive of hospital services.

Tools and Techniques
The difference in the extent of using the hospital services between the different types of respondents based on their Age, Gender, Educational Qualification, Occupational Status, Monthly Family Income, Marital Status, Residential Area, Awareness, Hospital information, Reasons, expectations, level of satisfactions were studied by means of Percentages, Averages, SERVQUAL model through SPSS.

The result was the development of SERVQUAL instrument based on the gap model. The central idea in this model is that service quality is a function of the difference scores or gaps between expectations and perceptions. An important advantage of the SERVQUAL instrument is that it has been proven valid and reliable across a large range of service contexts. However, while the SERVQUAL instrument has widely used, it has been subjected certain criticisms as well. It has been suggested that for some services the SERVQUAL instrument needs considerable adaptation and that items used to measure service quality should reflect the specific service setting under investigation, and that it is necessary in this regard to modify some of the items and add or delete items as required.

Satisfaction is defined as a patients perception of a single service experience, where as quality is the accumulation of the satisfaction for many patients over many service experiences. Such past evaluative experiences perhaps lead overtime to a more general attitude. Moreover, Services isequal to the perception of a Single Service as received and measured against the expected service received. The difference in the degree, direction and discrepancy between the perceptions and expectations of patients result in a level of satisfaction or dissatisfaction. Satisfaction and Service quality are often treated together as functions of a patients perceptions and expectations. The simplest model is the two concept equation defined as $Q = P - E$. When perceptions (P) are equal to expectation (E), Service Quality

(Q) is satisfactory. If expectations are higher than actual perceptions, a patient s rating becomes negative. Patients Satisfaction in the field of Health Care Industry is related to the Perceived discrepancy between actual ideal levels of service. Therefore, both perceptions and expectations of service are being measured and on the other hand the measurement and understanding of patients satisfaction with services incorporates both health care provider issues. In the hand book of measuring patients satisfaction and service quality, five gaps have been identified, Consumer expectation – management perception gap, Management perception – Service quality specification gap, Service Quality Specification – Service delivery gap, Service delivery – External communication gap and Expected Service – Perceived Gap , which also indicate the sequence of quality management from monitoring to remedial actions and finally assessment.

Service Quality has been described as a form of attitude, related but not equivalent to satisfaction which results from comparison of expectations with performance. Service Quality involves a comparison of expectations with performance. It is a measure of how well the service level delivered matches patients expectations on a consistent basis.

MODEL RESULTS
The standard scale of SERVQUAL was administered to 720 respondents. Primary data was analyzed using mean average. Gap analysis was done by calculating the average mean for individual statements and dimensions namely: reliability, assurance, tangibility, empathy and responsiveness.

TABLE NO. 01 SERVICE QUALITY GAP ANALYSIS

Attributes	Expectations (E)	Perceptions (P)	Gaps (E)-(P)	% of Satisfaction
Best & Latest –modern looking medical Equipments	3.81	3.44	-0.37	-9.7
Visually appealing Physical facilities	3.52	2.97	-0.55	-15.6
Usage of Modern technology in Service.	3.53	3.38	-0.16	-4.2
The hospital staffs will be neat in appearance	3.71	4.17	0.46	12.4
Doctors keep their promises	3.50	4.23	0.73	20.9
The hospital staffs show sincere interest in solving patient problems	3.71	4.21	0.49	13.5
The services of the hospital will be quite dependable	2.85	4.27	1.42	49.8
The hospital staffs provide their services as promised	3.37	3.98	0.61	18.1
Hospital keep error-free records	3.59	3.86	0.28	7.5
The employees in hospital inform exactly when services will be performed	4.20	3.68	-0.52	-12.4

Attributes	Expectations (E)	Perceptions (P)	Gaps (E)-(P)	% of Satisfaction
The employees in hospital give prompt service to patients	3.63	3.36	-0.27	-7.4
The employees will always willing to help patients	3.84	3.42	-0.42	-10.9
The employees will never too busy to respond to request of the patients	3.32	3.55	0.23	6.9

/attendants				
Employees behaviour instill patient confidence	3.60	3.12	-0.49	-13.3
Patients feel safe in their treatment	3.72	3.16	-0.55	-15.1
Employees will be consistently courteous with the patients (Showing Polite, kind and good manners)	3.49	3.48	-0.01	-0.3
Employees will have the sufficient knowledge to answer patients" questions	3.63	3.62	-0.01	-0.3
The hospital employees will give patients individual attention	3.60	3.44	-0.17	-4.4
Hospital will have operating hours convenient to all patients	3.66	3.43	-0.23	-6.3
The hospital staff will understand/justifying the needs of their patients	3.56	3.49	-0.07	-2.0
The hospital employees will have the patients" best interest at heart	3.52	3.32	-0.20	-5.7
Employees who deal with patients in a caring fashion	3.44	3.77	0.33	9.6

Above table No.01 it is found that among the twenty twostatements in different dimensions only eight statements have a positiveservice gap viz., The hospital staff will be neat in appearance (0.46), Doctors keep their promises (0.73), The hospital staff show sincere interest in solving patients" problems (0.49), The services of the hospital will be quite dependable (1.42), Hospital keep error-free records (0.61), The employees will never be too busy to respond to request of the patients /attendants (0.28) and Employees who deal with patients in a caring fashion (0.33). On the other hand, the other variables are having negative service gap.

TABLE NO. 02 MEAN SCORES OF FIVE DIMENSIONS

Dimensions	Expectations (E)	Perceptions (P)	Gaps (P)-(E)	% of Satisfaction
Tangibility	3.64	3.47	-0.17	-4.19
Reliability	3.53	4.02	0.49	14.18
Responsiveness	3.61	3.42	-0.19	-4.29
Assurance	3.60	3.33	-0.27	-7.34
Empathy	3.52	3.50	-0.02	-1.86
Overall Results	3.57	3.59	-0.02	-0.8

DISCUSSION ON RESULTS

Quality is important factor in Service industries. The researcher fund the service quality has focused primarily on how to meet the external patients expectations and views service quality as a measure of how the delivered service level matches patients expectations. These perspectives can also be applied to the employees of the health care sector and in this case, other major gaps can be closed in service quality gaps mode .

On the basis of mean score calculated for individual dimensions, It is found that assurance dimension of Health Care Service has more gap. Then tangibility and responsiveness dimensions are having as second and third more service gap respectively and Empathy as fourth in the list. On the other hand, only the dimension of reliability has no gap. Overall the gap in assurance, tangibility and responsiveness are more in service quality in Health Care Industry which need to be taken care. The Health care industry has to improve in these four dimensions tangibility, responsiveness, assurance and empathy, so that their overall satisfaction level reaches at the maximum level.

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