A Study on Service Quality in Private Hospitals with Special Reference to Tamil Nadu

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Abstract - Fulfilling clients is one of the primary targets of each business. Organizations perceive that keeping current clients is more beneficial than winning new ones to supplant those lost. Administration and showcasing scholars underscore the significance of consumer loyalty for a business’ prosperity. Clients' view of service quality outcome from an examination of their before-service desires with their real service involvement. The present examination is an endeavor to gauge the service quality of patients of private hospitals of Tamil Nadu. Private hospitals were taken for study and 223 patients were requested to fill the service quality device. The information was broke down considering age as free factor and service quality as reliant variable. The aim of this study was to determine the different dimensions of the service quality in the private hospitals and evaluating the service quality from the patients' perspective.

Key words: Service Quality, Customer Satisfaction, Private Hospital

I. INTRODUCTION

Great wellbeing is generally acknowledged as an essential component of monetary advancement. The social insurance frameworks in India had a blended improvement in the previous few decades. The advancement of economy has made new chances to create more salary there by diminishing neediness. These things have changed the wellbeing looking for examples of the general population. Individuals today are more wellbeing cognizant and are prepared to spend additional change to benefit quality services. For improved quality of governance of healthcare systems, establishing institutional frameworks, investing more in technology, better information technology enabled healthcare services and recruiting skilled work force is essential. Service quality has become a much bigger issue in India as our economy is becoming more and more dependent on the contribution from services sector. In India the services industry is slow in recognizing the value of service quality and its implications on the customer satisfaction.

II. REVIEW OF LITERATURE

Barksdale & Johnson (1994) they study “came out with a model which highlights the patient physician relationship maintenance process. The results indicate that in a managed healthcare setting availability of physician has an impact on the patient-physician relationship. Patient’s affective attitude and satisfaction can be influenced by the manner physicians treat patients. When patients are assigned to different physicians they may not feel invested in the relationship”.

Panchapakesan Padma, Chandrasekharan Rajendrnan, Prakash Sai Lokachari, (2010) they findings from this study Patients and attendants treat the interpersonal aspect of care as the most important one, as they cannot fully evaluate the technical quality of healthcare services. The study also exposed that the hospital service providers have to understand the needs of both patients and attendants in order to gather a holistic view of their services.

Braunsberger (2002) he found from service quality in hospitals” showed that the patients with low level of education perceived the performance to be higher than the patients with higher level of education. More educated patients tend to be less satisfied because they have higher expectations or they apply stringent standards while evaluating the care provided.”

(Broadberry, 2012)”India’s trade deficit is the largest one among BRICS. But with a growing dynamic population its matter of time before the trade deficit shortens and may turn up as trade surplus as in the case of China. Even though it suffered a trade imbalance at the onset of global economic crisis in 2008-09 period, the domestic consumption made the effect lesser to some extent”.

(Burch, Louisiana, Rogers, & Underwood, 1995).The performance items in SERVPERF instrument showed Unidimensionality and strong internal consistency. Further research is needed to find out the applicability of SERVPERF in different service settings.
Objectives of the Study

- The objective of the study is to determine whether the dimensions of service quality significantly affect patient dependability in private hospital.
- To find out the service quality perceptions from the patients as well as their attendants Perspective.
- To identify the relationship between service quality perceptions and overall satisfaction in private sector as well as public sector healthcare services.

Limitations of the Study:

The study focused only on the two private hospitals in Tamil Nadu region, having compatibility.

Sample Area

Study was done in Private Hospitals as it has healthcare in Tamil Nadu and one of the best performers in healthcare segment (Indian healthcare: 2010). Private hospitals were chosen based on similarity in respondent’s profile and specialty in treatments. With respect to private sector healthcare services the private hospital which is mainly for maternal healthcare and child healthcare were taken.

Sample Size

Study was conducted in four major private hospitals having compatibility in Tamil Nadu region. Total sample size was 223. Hence approximately one third of the population from each sector was taken as sample. Simple random sampling procedure was followed to draw samples.

Statement of the Problem

Despite the fact that service quality is the for the most part utilized instrument in estimating the service quality it has a few downsides. For the most part on the two sorts of instrument utilized for estimation and it's planning of organization. Cronin and Taylor concocted service quality for the most part to addresses the issues relating to service execution. Service quality adjustment is gradually picking up noticeable quality with more number of scientists adjusting it for different service circumstances. service quality estimation was tried in Fast nourishment eateries, Laundry services, Banking and Pest control. Basically the adjustment of service quality instrument to quantify service quality in Indian human services division is yet to take off. Optionally all the service quality related investigations in human services were finished with patient's viewpoint as it were. Social insurance is one among not very many service portions where the purchaser and client might be completely unique. Much of the time the orderly who goes with the patient will be in better position to examine the service quality parameters.

III. METHODS

The examination test was chosen from among all patients who were hospitalized in private hospitals of Tamil Nadu. Private hospitals were considered for examination and the examples were isolated among the all hospitals dependent on proportionality to the size. The consideration criteria contained grown-up patients matured 15 years and more seasoned who were remained something like 24 hours in the doctor’s facility and willing to take an interest in the examination. The examples were chosen haphazardly in every clinic, and the polls were given to them upon the arrival of release. The point of the examination was disclosed to patients, and they were guaranteed of the protection of their data.

Collection of Data:

There are two ways to deal with gather data about a circumstance, individual, issue or marvel. Once in a while data required is now accessible and require just be extricated. Be that as it may, there are times when the data must be gathered. In view of these expansive ways to deal with data gathering information is arranged as:
1. Primary Data - Primary data is collected through observation, interviews and/or questionnaires.
2. Secondary Data - Secondary data is collected from secondary sources such as Government publications, personal records, census, news papers, magazines and journals.

In the present study in-depth face-to-face interviews were used as primary data collection method. Primary Data was collected from 224 respondents covering private hospitals by administering Service Quality Measurement by service quality questionnaire.

IV. ANALYSIS AND INTERPRETATION

I - One Sample Test

$H_0$ -There is no significant influence of all factors on patient loyalty at private hospital in Tamil Nadu

$H_a$ -There is a significant influence of all factors on patient loyalty at private hospital in Tamil Nadu
There is no significant influence of all factors on patient loyalty at private hospital in Tamil Nadu. Since the p value 0.002 is less than 0.05 (p<0.01), there is a significant difference in the ranking of service quality of Private Hospitals. It is concluded that the customers of Private Hospitals have ranked the features of a service in a significantly different manner. Out of the thirteen features considered for analysis, ‘Slick and sharp looking work force’ has the lowest mean rank. Hence, it could be concluded that the Slick and sharp looking work force of the service has been the most attractive feature of the service quality in Private Hospitals.

**II- Friedman Test**

**Null Hypothesis H0**: There is no significant difference in the ranking of service quality of Private Hospitals.

**Alternative Hypothesis H1**: There is no significant difference in the ranking of service quality of Private Hospitals.

Based on the results of the One sample t-test analysis at 95% confidence level, the Hypothesis H0 - There is no significant influence of all factors on patient loyalty at private hospital in Tamil Nadu is rejected, and Ha - There is a significant influence of all factors on patient loyalty at private hospital in Tamil Nadu is not rejected since one sample t-test successfully revealed a statistically significant values for service quality. Mean values fall in positive side of rating (less than 5), ‘ t’ value > tab value and p-value < α = 0.05 for all the select service quality under study.

### Table No – 1: One Sample t Test for Service Quality in Private Hospital with special reference to Tamil Nadu

<table>
<thead>
<tr>
<th>Feature</th>
<th>Mean Rank</th>
<th>Chi-Square</th>
<th>Significance</th>
</tr>
</thead>
<tbody>
<tr>
<td>True enthusiasm of faculty in taking care of patients' issues</td>
<td>4.54</td>
<td>500.922</td>
<td>0.00**</td>
</tr>
<tr>
<td>Doing of the services comfortable first time</td>
<td>8.36</td>
<td>7.98</td>
<td>5.03</td>
</tr>
</tbody>
</table>

**Table No – 2: Friedman Test for Service Quality in Private Hospital with special reference to Tamil Nadu**
Respectful and well disposed managing of staff with patients | 8.37 |
Learned faculty to answer patients’ questions | 7.68 |
Singular regard for patients | 6.30 |
Understanding particular needs of patients | 7.80 |
Having patients’ best enthusiasm on a basic level | 8.35 |
Slick and sharp looking work force | 4.42 |
Perfect and agreeable condition of the healing facility | 7.50 |
Present day and a la mode hardware | 6.90 |
Outwardly interest of physical offices | 7.77 |

| IV. FINDINGS, SUGGESTION AND CONCLUSION |

Findings
- The results of the One sample t-test analysis at 95% confidence level, the Hypothesis H0 -There is no significant influence of all factors on patient loyalty at private hospital in Tamil Nadu is rejected, and Ha -There is a significant influence of all factors on patient loyalty at private hospital in Tamil Nadu is not rejected since one sample t-test successfully revealed a statistically significant values for service quality.
- Mean values fall in positive side of rating (less than 5), ‘ t’ value >ttab value and p-value < α = 0.05 for all the select service quality understudy.
- Concluded that the customers of Private Hospitals. Have ranked the features of a service in a significantly different manner.
- Out of the thirteen features considered for analysis, ‘Slick and sharp looking work force’ has the lowest mean rank. Hence, it could be concluded that the Slick and sharp looking work force of the service has been the most attractive feature of the service quality in Private Hospitals.

Suggestions
- Open division social insurance services needs an exceptional change in substantial quality factor. Indeed on the off chance that they can’t include more beds, legitimately keeping up them will diminish losing a greater amount of them to wear and tear.
- Appropriate motivational projects for Para medicinal staff in taking care of patients and their specialists will decrease the evil treatment the patients and their chaperons confront regularly out in the open division social insurance services.

- Including patients and their chaperons in basic leadership will help the association to monitor the requirements these clients have and to discover ways to satisfy them.

V. CONCLUSION
The outcomes demonstrated that service quality is a legitimate, solid, and adaptable instrument to screen and measure the services quality in private hospitals of Tamil Nadu and empowers the healing facility supervisors to distinguish the regions that need change from the patients’ point of view. The outcomes could be utilized in the getting ready for quality change by private hospitals. As indicated by the discoveries, the quality change endeavors of private hospitals is encouraged to for the most part center around modernizing gear, convenience of consideration conveyance, exactness of execution and in addition on improving the relational connections and relational abilities of its doctors, medical caretakers and other staff.

REFERENCES