

MEASUREMENT OF SERVICE QUALITY IN PRIVATE MULTI SPECIALITY HEALTHCARE UNITS IN SALEM DISTRICT, TAMILNADU

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Abstract: The purpose of the study is to measure the inpatients perceived service quality for multi-specialty hospitals in Salem district of Tamil Nadu. The target population of the study is inpatients of multi-specialty hospitals in Salem district. The study has identified, Medical Service, Empathy, Admission, Discharge, Physical Ambience, Equality, Infrastructure, Tangibility, Medical Care and Availability of Medicine were the dimensions of service quality of Hospitals. The Study also identified that out of ten identified dimensions, only Tangibility, Admission, Equality, Medical Service; Medical Care has significant impact on inpatient satisfaction. The identified dimensions may help the multi-specialty hospitals to frame suitable policies regarding various dimensions of inpatients perceived service quality.

Index Terms - Admission, Discharge, Equality, Medical Care, Physical Ambience.

I. INTRODUCTION

Health is one of the fundamental human rights which has been accepted in the Indian Constitution. Although Article 21 of the Constitution requires the State to ensure the health and nutritional well being of all people, the federal Government has a substantial technical and financial role in the sector. Hospitals are the backbone of the healthcare delivery system. Hospital care in India until the early 1980s, were run by Government hospitals and those managed by charitable associations. In the mid 80's, the healthcare sector was recognized as an industry. In the year 1991 Government of India initiated economic reforms. However, post liberalization, the sector attracted private capital and fresh investment that took place in setting-up hospitals and smaller nursing homes. Large corporate groups and charitable organizations brought private finance and these resources were invested in modern equipment's and technologies and in developing health infrastructure. This helped in augmenting the availability of super-specialty services across the country. Corporate groups such as Apollo Hospitals group, Care Health Foundation, Wockhardt group of hospitals, Fortis Healthcare, Max India paved the way for corporate organization structure for hospitals and have successfully developed a chain of multi-specialty private hospitals. Private sector entry in India has opened many doors for medical and paramedical manpower, medical equipment, information technology in health services, BPO, telemedicine and medical and health tourism. There is 20% increase over the previous year with an estimated 100,000 health tourists visiting India.

The health sector in India is characterized by a government sector that provides publicly financed and managed curative, preventive and primitive health services from primary to tertiary level throughout the country free of cost to the people and a fee-levying private sector that plays a dominant role in the provisioning of curative care. The provision of healthcare by the public sector is a responsibility shared by the state government, central government and local governments in India. General health services are the primary responsibility of the states with the central government focusing on medical education, drugs, population stabilization and disease control. The National Health Programs of the central government are related to reproductive and child health and to the control of major communicable diseases. Besides, it also contributes significantly to state health programs. While, the private sector in India has a dominant presence in all the submarkets including medical education and training, medical technology and diagnostics, pharmaceutical manufacture and sale, hospital construction and ancillary services and, finally, the provisioning of medical care. The respective role of the public and private sectors in healthcare has been a key issue in debate over a long time. As public healthcare has always played an important role in India, it is important to examine its significance especially in the context of contemporary issues related to increasing privatization in the health sector in India.

1.1 Healthcare in India

India is a Democratic Republic consisting of 28 States and 7 Union Territories (directly administered by the Central Government). According to the Constitution of India, state governments have jurisdiction over public health, sanitation and hospitals while the Central Government is responsible for medical education. State and Central Governments have concurrent jurisdiction over food and drug administration, and family welfare. Even though health is the responsibility of the states, under the Constitution, the Central Government has been financing the national disease control, family welfare and reproductive and also the programmes that are related to child health. Each state therefore, has developed its own system of Health care delivery, independent of the Central Government.

In India, public spending on healthcare is low compared to the developed countries, having declined from 1.3% of GDP in 1990 to 0.9% of GDP in 1999. The Government, in its National Health Policy, 2002 (NHP 2002), is targeting an increase of healthcare expenditure to 6% of GDP by 2010, with 2% of GDP being funded by public health investment. Today public spending on health is a mere 1% of GDP calculated in India Budget 2011-2012. Public spending on health care as per the World Health Organization recommends should be at least 5%. The government over the last six years has not been able to move towards its own target of 3% of GDP for health. The share of the Central government in public spending for health is a mere 0.25% of GDP when as per the UPA target it should be 40% of 3% of GDP that is 1.2% of GDP or Rs. 86,400 crores at today's prices.

1.2 Patients' Satisfaction

Patients' satisfaction is a patients' feelings of pleasure or disappointment resulting from comparing a service's perceived performance or out come in resulting from comparing a service's perceived performance or outcome in relation to his or her expectations i.e. satisfaction may be perceived as a state of fulfil next which is connected to reinforcement. The level of patients' satisfaction is reflected in her/his opinion on valorous aspects of hospital services. A dissatisfies patients is not likely to become a loyal patient. Patient loyalty is based on paint satisfaction.

II Research Background

The research undertaken in this thesis is grounded in marketing theory. While there are many academic disciplines that investigate the issue of quality, marketing is considered the best match for the purpose of the research. There are three reason for this. Firstly, marketing is based on the central importance of the needs of the final client in guiding organizational activities. Secondly, service marketing is a strong and well-established area with in marketing and provides important frameworks and concepts that are valuable in understanding the nature of the service product. Understanding the service product is critical if the nature of service quality is to be fully understood. Thirdly, the commonly used SERVQUAL instrument and the expectations - perceptions model of service quality on which it is based, as well as the Nordic and perceptions – based conceptualization of service quality, were developed within the services marketing disciplines

2.1 Statement of the Problem

Hospitals play an integral part in healthcare system in India. They perform various functions like In-patient services, Research and Development, Training etc. Indian hospitals can be categorized into Public hospitals (Government), Private and not for-profit (Missionary/Trust owned) hospitals. The Public hospitals are run by the Central and State Governments and Missionary hospitals by charitable trusts which endows with free services or at subsidized rates to the needy Due to Liberalization, Privatization and Globalization (LPG) there is a change in economical empowerment of the middle class due to which there has been a boost in the number of corporate hospitals and private hospitals that provide healthcare services in towns and cities.

2.2 Importance of the Study

The service sector plays a vital role in the economic development of the country. The service sector on the verge of its inception has contributed 33.25 per cent towards Gross Domestic Product (GDP) in the year 1950-1951 and the contribution of this sector has increased to 57.03 per cent in the previous financial year. The contribution itself accounts to the major part of the GDP is raised from the service sector. The contribution from the other sectors has been declining constantly which is due to the growth of the service sector. The service sector which has the health care in its fold has been playing vital role in the contribution of the GDP. The health care sector has been contributing to marginal extent which emphasis the need for the provision of service at optimal quality. The health care sector being the heart of saving the lives of the people has to take utmost care in delivery of the service. The health care sector has also indulges in competition in provision of the services. This competition in turn diminishes the quality of the services provided by the health care sector. Hence the study aims to identify the various gaps private healthcare units in Salem district, Tamilnadu.

2.3 Scope of the Study

The medical profession has broadened its horizon globally and India is no exception. Corporate hospitals are emerging as new breed in healthcare industry in India. These hospitals are attracting a number of patients because of their super-specialties. There is keen competition among these hospitals for market share. The emphasis is not only to provide specialized services more efficiently and effectively, but also to maintain the quality of overall services.

2.4 Objectives of the Study

1. To identify the level of perception of the patients about the health care industries in the study area.
2. To analyse the satisfaction level of the patients on the service quality offered by the health care industry.

2.5 Research Methodology

The methodology of the study deals with description of methodology and the blueprint undertaken for collection and organization of data and presenting the findings of investigation in accordance with the objectives of the study. The present research study involves exploratory methodology involving empirical recording of facts, where the study aims to explore the various dimensions that determines the quality of the services provided by the private healthcare industry. It also aims to identify the various aspects that the private health care sector has to concentrate in-order to retain the existing customers as well as to attract new customers.

In the light of the developments, it has been pertinent to focus the study on the quality of service providers' service quality in multi-speciality hospitals in Salem district. In this process the following points arise:

- The service gap in satisfaction of the patients while in utilizing the services of health care industry in Salem district.
- To the extent of the patients' expectations on hospital services fulfilled
- Factors underlining of service quality and patient relationship perceptions in a multi-speciality hospital encounter and
- The service qualities singularly and collectively influence the overall patients' satisfaction.

III CONCLUSION

The need for continuous improvement of quality and safety in the provision of patient care has become axiomatic. The resultant paradigm shift from an acceptance of the status quo to a drive for constant improvement in clinical practice has required the engagement of multiple monitoring and improvement strategies. The research was conducted to identify the key service quality factors of private multi-specialty hospitals that affect patients' satisfaction and assess how patients rate the service quality dimensions of both government and private hospitals. Out of Thirteen, eight service quality dimensions comparison have positive impacts on patient satisfaction. It identifies the important service quality dimensions of the government and private hospitals to better understand the requirements of the patients to increase their satisfaction. Therefore, the study suggests that the Chiefs of Private multi-specialty hospitals should pay adequate attention to the service quality dimensions which are critical influencers of patients' satisfaction, eventually increase overall patient satisfaction with their services.

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