

A Study on Service Quality of Selected Hospitals with reference to Trichy

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ABSTRACT

The service and manufacturing are entirely different, because the manufacturing defects may be ratified by the company and the compensation will be possible. The manufacturing industries would come out from the issues through upgraded products and better price. The service sectors are entirely different; there are limited machines but majority of the work through human beings. The employees are trying to give best service to the public; the instruction and training are given by the employers to deliver best service to the public. The hospitals are playing imperative role in the society to save life. The goodwill of the hospitals would spread through all types of peoples like educated and uneducated patient. The patients have a strong trust that there is a relationship between them and the medical practitioner and it would continue even they come out of the hospital. The care taken by the practitioner on the patients even when they call is also taken in to consideration for the best service provided to

them by the hospital. The patients make a credit to the hospital on the basis of the interaction quality between them and the practitioners, nurse and the staff members of the hospital. The patients believe that their needs are fully satisfied in the hospital in all aspects like creating and maintaining a relationship between the provider and the customer in the service sectors.

Keywords : Service Quality ; Hospitals ; Patient Satisfaction.

INTRODUCTION

The service and manufacturing are entirely different, because the manufacturing defects may be ratified by the company and the compensation will be possible. The manufacturing industries would come out from the issues through upgraded products and better price. The service sectors are entirely different; there are limited machines but majority of the work through human beings. The employees are trying to give best service to the public; the

instruction and training are given by the employers to deliver best service to the public. The hospitals are playing imperative role in the society to save life. The goodwill of the hospitals would spread through all types of peoples like educated and uneducated patient. Many uneducated peoples are also known the hospitals and treatment through their relatives and friends. The deceases are common for all, so the peoples are very particular about the hospitals. The patients are satisfied, they will recommend their friends and relative to take treatment; but if they did not satisfy, they never recommend and the same time they will try to stop the patients.

All the hospitals appointed the Human Resource Manager to take care of the patients and visitors; they are working 24 hours and 7 days style in the leading hospitals. There is competition between the hospitals; they are importing upgraded machines to take the entire test and give the results very soon to satisfy the patients. The management are depending the senior most doctors in the leading hospitals, so the management holding the senior most doctors to give best treatment to their patients. The management usually measures the service of their hospitals through human resource managers. They would find out the discomfort faced by the patient to over come in future. So this study is

important to measure the service quality of the hospitals to give suggestion to the hospital management at Trichy.

Objectives of the Study

The following are the objective of the study

1. To find out the service quality dimensions of hospitals.
2. To present the socio economic factors of the study.
3. To present the factors that influences the service quality dimensions.
4. To offer suggestions to the hospitals regarding service.

Scope of the Study

The hospitals are functioning as service motives; the service sector is entirely different from manufacturing sector. The products has defect the manufacturing sector could replace and satisfy the customers, but in service sector entirely different. The human beings are fully involving in service sector; service is the main motive of hospitals. The public may select the hospitals for medical treatment through their friends and relatives. If the persons dissatisfy of treatment they never suggest the hospital, So the top level employees of service sector are given training to concentrate their service every day and every hour. So this study is important to measure

the service quality of leading hospitals at Trichy. This study suggestion and conclusion will help the top level employees of the hospitals to know their service quality and to improve their service.

Research methodology

Two hundred and twenty five patients are selected for this study to measure the service quality of hospitals at Trichy. The convenient sampling method is used to collect data from 10 leading hospitals. 250 Questionnaire were issued to the leading 10 hospitals, each hospitals each by 25. But the questionnaires were collected back by 225. So the sample was size taken as 225. The in patients and out patients were taken for this study, if the patients unable to answer the questions the data collected from the dependents. The percentage analysis used to show the socio economic factors of the respondents and chi square test is applied to find out the factors influencing the service quality dimensions.

ANALYSIS AND INTERPRETATION

PERCENTAGE ANALYSIS

The below table has shows the socio economic factors of the respondents. The two hundred and twenty five samples have taken for

this study. One hundred and twenty seven (56.44%) are male and the remaining ninety eight (43.56%) respondents are female. Majority (56.44%) of the respondents are male.

Thirty seven (16.44%) respondents are come under the age group of up to 30 years. Ninety five (42.22%) respondents are come under the age group of 31 years to 45 years and the remaining ninety three (41.34%) respondents are come under the age group of above 45 years. Majority (42.22%) of the respondents are come under the age group of 31 years to 45 years.

Fifty one (22.67%) respondents studies up to school level. Fourty eight (21.33%) respondents are under graduates. Sixty two (27.55%) respondents are post graduates. Fourty two (18.67%) respondents are professionals and the remaining twenty two (9.78%) respondents educational qualification is others i.e. diploma and other qualifications. Majority (27.55%) of the respondents are post graduates.

Table No. 1 : Socio economic factors of the Respondents

Variables	Category	Number of Respondents (%)	Variables	Category	Number of Respondents (%)
Gender	Male	127 (56.44%)*	Kinds of Patient	In patient	108 (48.00%)
	Female	98 (43.56%)		Out Patient	117 (52.00%)*
Age Group	Up to 30 years	37 (16.44%)	Monthly Family Income	Up to Rs. 25,000	59 (26.22%)
	31 years to 45 years	95 (42.22%)*		Rs. 25,001 to Rs. 40,000	78 (34.67%)
	Above 45 years	93 (41.34%)		Above Rs. 40,000	88 (39.11%)*
Educational Qualification	School level	51 (22.67%)	Type of Family	Joint	94 (41.78%)
	Under Graduate	48 (21.33%)		Nuclear	131 (58.22%)*
	Post Graduate	62 (27.55%)*	Number of family members	Up to 3 members	62 (27.56%)
	Professionals	42 (18.67%)		4 to 6 members	84 (37.33%)*
	Others	22 (9.78%)		Above 6 members	79 (35.11%)
Total Sample : 225			* Majority		

Source : Survey Data

One hundred and eight (48.00%) respondents are inpatient and the remaining one hundred and seventeen (52.00%) respondents are out patient. Majority (52.00%) of the respondents are out patients.

Fifty nine (26.22%) respondents monthly family income is up to Rs. 25,000. Seventy eight (34.67%) respondents monthly family income is between Rs. 25,001 and Rs. 40,000 and the remaining eighty eight (39.11%) respondents family monthly income is above Rs. 40,000. Majority (39.11%) of the respondent monthly family income is above Rs. 40,000.

Ninety four (41.78%) respondents family type is Joint and the remaining one hundred and thirty one (58.22%) respondent family type is nuclear. Majority (58.22%) of the respondent family type is nuclear.

Sixty two (27.56%) respondents have family members are up to 3. Eighty four (37.33%) respondents have family members of 4 to 6 members and the remaining seventy nine (35.11%) respondents have family members of above 6. Majority (37.33%) of the respondents have 4 to 6 family members.

DIMENSIONS

The researchers have designed six dimensions to measure the service quality of hospitals at Trichy. (i) Tangibility ; (ii) Reliability ; (iii) Responsiveness ; (iv) Assurance ; (v) Courtesy and (vi) Empathy. The above said dimensions are designed by the researcher. All the dimensions has five variables each to measure

the service quality of the hospitals service. The five point likert scale is used to measure the level of service quality of the sample respondents. The mean, SD, minimum and maximum score were calculated for chi square test. It is presented in the following table.

Table No. 2 : Means, SD, Minimum and Maximum Score

Sl. No.	Dimensions	Mean	SD	Minimum	Maximum
1	Tangibility	3.547	1.245	6	20
2	Reliability	3.954	1.624	7	18
3	Responsiveness	4.621	1.008	12	23
4	Assurance	4.284	1.187	11	21
5	Courtesy	2.947	1.945	9	17
6	Empathy	3.228	1.992	8	18

The above table shows the Mean, SD, minimum and maximum score of the service quality dimensions. The responsiveness has the highest mean score of 4.621 (SD – 1.008, Mini – 12 and Max score of 23). The Courtesy has the least mean score of 2.947 (SD – 1.945, mini – 9 and

maximum score of 17). It is clearly shows the responsiveness is highly influence the service quality of the respondents.

CHI SQUARE TEST

The following table are presents the chi square value of the respondents on dimensions wise.

Table No. 3 : Socio economic factors and Tangibility of the Respondents

Sl. No.	Variables	DF	P – Value	Result
1	Gender	2	0.004	Significant
2	Age Group	4	0.094	Not Significant
3	Educational Qualification	8	0.018	Significant
4	Kinds of Patient	2	0.001	Significant

		5	Monthly Family Income	4	0.002	Significant
		6	Type of Family	2	0.007	Significant
7	Number of family members	4	0.481	Not Significant		

Source : Computed Data

The above table shows the chi square analysis. Nine variables are designed to measure the tangibility of the service quality. The P-value is calculated to compare with standard p-value to give the result whether the hypothesis is accepted or rejected. The p-value is less than 0.05 the socio economic factor is influence the level of tangibility the same time the p-value is higher than 0.05 the socio economic factor is not

influence the level of tangibility. The above table shows the socio economic factors and level of tangibility of the respondents. The gender (0.004), educational qualification (0.018), kinds of patient (0.001), monthly family income (0.002) and type of family (0.007) are significantly influence the level of tangibility of the respondents. Hence, the null hypothesis is rejected at 5% significant level. The age group (0.094) and number of family members (0.481) are not significantly influence the level of tangibility of the respondents hence, the null hypothesis is accepted at 5% level.

Table No. 4 : Socio economic factors and Reliability of the Respondents

Sl. No.	Variables	DF	P – Value	Result
1	Gender	2	0.013	Significant
2	Age Group	4	0.008	Significant
3	Educational Qualification	8	0.175	Not Significant
4	Kinds of Patient	2	0.067	Not Significant
5	Monthly Family Income	4	0.017	Significant
6	Type of Family	2	0.024	Significant
7	Number of family members	4	0.007	Significant

Source : Computed Data

The gender (0.013), age group (0.008), type of patient (0.067), monthly family income (0.017), type of family (0.024) and number of family members (0.007) are significantly influence the level of reliability of the respondents hence, the

hypothesis is rejected at 5% level. The educational qualification (0.175) and kinds of patient (0.067) are not significantly influence the reliability of the respondents. Hence, the null hypothesis is accepted at 5% significant level.

Table No. 5 : Socio economic factors and Responsiveness of the Respondents

Sl. No.	Variables	DF	P – Value	Result
1	Gender	2	0.487	Not Significant
2	Age Group	4	0.001	Significant
3	Educational Qualification	8	0.948	Not Significant
4	Kinds of Patient	2	0.003	Significant
5	Monthly Family Income	4	0.041	Significant
6	Type of Family	2	0.082	Not Significant
7	Number of family members	4	0.257	Not Significant

Source : Computed Data

The age group (0.001), kinds of patient (0.003) and monthly family income (0.041) are significantly influence the responsiveness of the respondents. Hence, the null hypothesis is rejected at 5% significant level. The gender (0.487), educational qualification (0.948), type of

family (0.082) and number of family members (0.257) are not significantly influence the level of responsiveness of the respondents. Hence, the null hypothesis is accepted at 5% significant level.

Table No. 6 : Socio economic factors and Assurance of the Respondents

Sl. No.	Variables	DF	P – Value	Result
1	Gender	2	0.004	Significant
2	Age Group	4	0.092	Not Significant
3	Educational Qualification	8	0.478	Not Significant
4	Kinds of Patient	2	0.021	Significant
5	Monthly Family Income	4	0.009	Significant
6	Type of Family	2	0.001	Significant
7	Number of family members	4	0.001	Significant

Source : Computed Data

The gender (0.004), kinds of patient (0.021), monthly family income (0.009), type of family (0.001) and number of family members (0.001) are significantly influence the level of assurance of the respondents. Hence, the null hypothesis is

rejected at 5% significant level. The age group (0.092) and educational qualification (0.478) are not significantly influence the level of assurance of the respondents. Hence, the null hypothesis is accepted at 5% significant level.

Table No. 7 : Socio economic factors and Courtesy of the Respondents

Sl. No.	Variables	DF	P – Value	Result
1	Gender	2	0.097	Not Significant
2	Age Group	4	0.001	Significant
3	Educational Qualification	8	0.021	Significant
4	Kinds of Patient	2	0.001	Significant
5	Monthly Family Income	4	0.007	Significant
6	Type of Family	2	0.421	Not Significant
7	Number of family members	4	0.214	Not Significant

Source : Computed Data

The age group (0.001), educational qualification (0.021), kinds of patient (0.001) and monthly family income (0.007) are significantly influence the level of courtesy of the respondents. Hence, the null hypothesis is rejected at 5% significant

level. The gender (0.097), type of family (0.421) and number of family members (0.214) are not significantly influence the level of courtesy of the respondents. Hence, the null hypothesis is accepted at 5% significant level.

Table No. 8 : Socio economic factors and Empathy of the Respondents

Sl. No.	Variables	DF	P – Value	Result
1	Gender	2	0.034	Significant
2	Age Group	4	0.008	Significant
3	Educational Qualification	8	0.069	Not Significant
4	Kinds of Patient	2	0.074	Not Significant
5	Monthly Family Income	4	0.094	Not Significant
6	Type of Family	2	0.001	Significant
7	Number of family members	4	0.008	Significant

Source : Computed Data

The gender (0.034), age group (0.008), type of family (0.001) and number of family members (0.008) are significantly influence the level of empathy of the respondents. Hence, the null hypothesis is rejected at 5% significant level. The educational qualification (0.069), kinds of patient

(0.074) and monthly family income (0.094) are not significantly influence the level of empathy of the respondents. Hence the null hypothesis is accepted at 5% significant level.

FINDINGS

The following are the findings of the study.

1. Majority (56.44%) of the respondents are male.
2. Majority (42.22%) of the respondents are come under the age group of 31 years to 45 years.
3. Majority (27.55%) of the respondents are post graduates.
4. Majority (52.00%) of the respondents are out patients.
5. Majority (39.11%) of the respondent monthly family income is above Rs. 40,000.
6. Majority (58.22%) of the respondent family type is nuclear.
7. Majority (37.33%) of the respondents have 4 to 6 family members.
8. The age group (0.094) and number of family members (0.481) are not significantly influence the level of tangibility of the respondents hence, the null hypothesis is accepted at 5% level.
9. The educational qualification (0.175) and kinds of patient (0.067) are not significantly influence the reliability of the respondents. Hence, the null hypothesis is accepted at 5% significant level.
10. The gender (0.487), educational qualification (0.948), type of family (0.082) and number of family members (0.257) are not significantly influence the level of responsiveness of the

respondents. Hence, the null hypothesis is accepted at 5% significant level.

11. The age group (0.092) and educational qualification (0.478) are not significantly influence the level of assurance of the respondents. Hence, the null hypothesis is accepted at 5% significant level.
12. The gender (0.097), type of family (0.421) and number of family members (0.214) are not significantly influence the level of courtesy of the respondents. Hence, the null hypothesis is accepted at 5% significant level.
13. The educational qualification (0.069), kinds of patient (0.074) and monthly family income (0.094) are not significantly influence the level of empathy of the respondents. Hence the null hypothesis is accepted at 5% significant level.

SUGGESTIONS

The following are the suggestion to the patients through this study.

1. The patients should be taken care right from the entry till they leave the premises.
2. Too much of formalities should be avoided while registering the patient's details.
3. They should be given proper guidance in filling forms.
4. Every section should be properly numbered and named.



5. Staff should answer the queries of the patients in a polite manner.
6. Patient's doubts should be cleared by the practitioner.
7. Patient's call has to be attended with due care even after discharge.

CONCLUSIONS

World has become a place of competition where even service sectors also in the stream of competition in providing service in a different way to attract and maintain customers in their organization. Providing after sale service in commercial sectors and customer service is the best way to keep their business going on the stream. Quality service has become the mantra of almost all organization whether commercial or non-commercial. Now a days it is been spread over to the service sectors like educational institution, transportation, hotels, entertainments, hospitals etc. The study here emphasizes the service quality of hospitals in the city. In private hospitals, where people pay huge amount of money on treatment, expect more quality in the service provided by the hospital. Quality is the only differential scale which is to measure the excellence of services. So, it is understood that measuring and developing quality has become a great challenge of hospitals. People of today

measures the quality by the service provided by the other party. Since people are not satisfied with the services provided by the public hospitals, they move on to the private hospitals for services. These factors give rise of many private hospitals in both urban and rural areas. Quality is considered to be the strategic weapon to defeat in this competitive world. In this, hospitals are providing greater services in order to maintain their customer in long run. Hospitals afford several services like filling applications, attending patients, providing waiting halls, provisions of water and sanitary services, entertainments for out patients waiting to visit doctors, visiting doctors, prescription given by doctors, care taken by them, consoling words of the doctors, pleasing care taken by the nurse and the staff in the hospital, phone attending by the staff, parking facilities and safety provisions by the hospital. When it comes to the in patients department, when they are admitted in the hospital, they look for more care and consoling words from the staff and the doctors. When these two are attained, the hospital will be taken by the patients at all levels in and around the city even abroad. So, satisfaction of the patients is the only service that has to be taken care by the hospital in all means to have a hold in the competitive place of service marketing. In the highly competitive market in

the hospitals run by the private people, has instigated an increasing pressure on them in providing a better service than their competitors. The patients have a strong trust that there is a relationship between them and the medical practitioner and it would continue even they come out of the hospital. The care taken by the practitioner on the patients even when they call is also taken in to consideration for the best service provided to them by the hospital. The patients make a credit to the hospital on the basis of the interaction quality between them and the practitioners, nurse and the staff members of the hospital. The patients believe that their needs are fully satisfied in the hospital in all aspects like creating and maintaining a relationship between the provider and the customer in the service sectors.

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