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“SERVICE QUALITY(SQ) OF “PRIVATE HOSPITAL” IN INDIA

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ABSTRACT

The main purpose of this study is to define Service Quality of healthcare quality to encompass healthcare stakeholder needs and expectations because healthcare quality has varying definitions for clients, professionals, managers, policy makers and payers. The efficacious, effective and efficient healthcare services according to the latest clinical guidelines and standards, which meet the patient's needs and satisfies providers". The topic effort to understand healthcare quality in an Iranian context. In-depth individual and focus group interviews were conducted with key healthcare stakeholders. Quality healthcare is defined as "consistently delighting the patient by providing efficacious, effective and efficient healthcare services according to the latest clinical guidelines and standards, which meet the patient's needs and satisfies providers". Healthcare quality definitions common to all stakeholders involve offering effective care that contributes to the patient well-being and satisfaction. This study helps us to understand quality healthcare, highlighting its complex nature, which has direct implications for healthcare providers who are encouraged to regularly monitor healthcare quality using the attributes identified in this study. Accordingly, they can initiate continuous quality improvement programmes to maintain high patient-satisfaction levels. This is the first time a comprehensive healthcare quality definition has been developed using various healthcare stakeholder perceptions and expectations. To understand why, we have to realize that health includes more than just health care.

- The Social and Economic Environment.
- Health Behavior.
- Clinical Care.
- The Physical Environment.

Quality health services should be: effective; safe; people-centred; timely; equitable; integrated; and efficient.

Keywords: Service Quality(SQ), healthcare, Clinical Care, Physical Environment, Social and Economic Environment, effective; safe; people-centred; timely; equitable; integrated; and efficient.

INTRODUCTION

Perceptions of quality of care from the lenses of patients accessing healthcare from healthcare delivery facilities are now considered to be very crucial in the health industry. The study sought to draw dichotomies in the quality of healthcare provision in private healthcare facilities with regards to level of care, attention and satisfaction received by patients at healthcare facilities. Also, the constraints of healthcare providers and the premium placed on customer service in their operations is to be examined. Quality of care is the degree to which health services for individuals and populations increase the likelihood of desired health outcomes. It is based on evidence-based professional knowledge and is critical for achieving universal health coverage. As countries commit to achieving Health for All, it is imperative to carefully consider the quality of care and health services.^[1] Quality health care can be defined in many ways but there is growing acknowledgement that quality health services should be:

- **Effective** – providing evidence-based healthcare services to those who need them;
- **Safe** – avoiding harm to people for whom the care is intended; and
- **People-centred** – providing care that responds to individual preferences, needs and values.

To realize the benefits of quality health care, health services must be:

- **Timely** – reducing waiting times and sometimes harmful delays;
- **Equitable** – providing care that does not vary in quality on account of gender, ethnicity, geographic location, and socio-economic status;
- **Integrated** – providing care that makes available the full range of health services throughout the life course;
- **Efficient** – maximizing the benefit of available resources and avoiding waste.^[2]

OBJECTIVES

- To study the expectations of in-patients regarding the service quality dimensions.
- To study & identify the perception level of the in-patients concerning the service quality dimensions.
- To study & examine the reasons for the gaps in expectations and perception in the quality of services availabilities.
- **To study the followings:**
 - ✓ **Timely:** reducing waiting times and sometimes harmful delays.
 - ✓ **Equitable:** providing care that does not vary in quality on account of gender, ethnicity, geographic location, and socio-economic status.
 - ✓ **Integrated:** providing care that makes available the full range of health services throughout the life course
 - ✓ **Efficient:** maximizing the benefit of available resources and avoiding waste.

SIGNIFICANCE

when efficient Health care is conventionally regarded as an important determinant in promoting the general physical, mental and social well-being of people around the world and can contribute to a significant part of a country's economy, development and industrialization and the major advantages in private hospital^[3] is as follows:

- Private hospitals are better equipped to offer personalized care.
- Shorter wait times.
- Excellent doctor-to-patient ratios.
- State-of-the-art medical equipment.
- Upscale amenities.
- Faster access to the best medical specialists.

THE HEALTHCARE SERVICE QUALITIES

Quality of care is the degree to which health services for individuals and populations increase the likelihood of desired health outcomes and are consistent with evidence-based professional knowledge. This definition of quality of care spans promotion, prevention, treatment, rehabilitation and palliation, and implies that quality of care can be measured and continuously improved through the provision of evidence-based care that takes into consideration the needs and preferences of service users – patients, families and communities. Multiple quality elements have been described over the past decades. There is now clear consensus that quality health services should be:

- **effective** by providing evidence-based health care services to those who need them;
- **safe** by avoiding harm to the people for whom the care is intended;
- **people-centred** by providing care that responds to individual preferences, needs and values, within health services that are organized around the needs of people;
- **timely** by reducing waiting times and sometimes harmful delays for both those who receive and those who give care;
- **equitable** by providing the same quality of care regardless of age, sex, gender, race, ethnicity, geographic location, religion, socio-economic status, linguistic or political affiliation;
- **integrated** by providing care that is coordinated across levels and providers and makes available the full range of health services throughout the life course; and
- **efficient** by maximizing the benefit of available resources and avoiding waste.

WHO's response

WHO is working with Member States and partners to ensure that quality of health services is a key component of making UHC a reality.

- supporting countries in the development, refinement and implementation of national quality policies and strategies for an integrated approach to quality health services;
- working with partners and a network of countries to learn how to improve the quality of care for maternal, newborn and child health at scale and in a sustainable way;
- developing the technical foundations for improving quality of care in fragile, conflict-affected and vulnerable settings;
- strengthening infection prevention and control (IPC) capacity alongside efforts on water, sanitation and hygiene (WASH), since both are pivotal to quality health services;
- promoting patient safety initiatives to reduce harm to patients in the delivery of quality essential health services;
- spearheading the development of quality of care measurement frameworks, indicators and reporting on progress;
- supporting the sharing of lessons and experiences within and between countries through the WHO Global Learning Laboratory for Quality UHC and by fostering twinning partnerships to improve quality of care; and
- providing support to countries in their work on community engagement for quality, people-centred and resilient health services.

METHODOLOGY

Service Quality Evaluation has become a vital aspect of medical care. Hospitals have expanded in terms of availability of specialties, improved technologies, facilities and increased competition and the expectations of patients and their relatives have increased many fold. The patients and their relatives coming to the hospital not only expect world-class treatment but also other facilities to make their stay comfortable in the hospital. Knowledge of expectation combined with understanding of perceived service quality facilitates designing and implementing programs to satisfy patients. The study was conducted with an objective of measuring service quality of IPD patients in a private hospital of PARAS-HEC Hospital, Ranchi(JH). **Methods:** Cross-sectional study was conducted by collecting primary data from 100 IPD patients on the day of discharge using random survey methodology through verbal questionnaires. And, the responses were sought on a 5-point Likert scale – 1 to 5 (1 = strongly disagree, 2= somewhat disagree, 3= neither disagree not agree, 4= somewhat agree, 5= strongly agree) and the formula used for testing the Hypothesis Chi-Square & t-Test.

SERVICE QUALITY IN PRIVATE HOSPITALS

As suggested by the original developers of the SERVQUAL model, the easiest way to remember the five dimensions are by using the letters of RATER^[4] as follows:

- R = Reliability
- A= Assurance
- T = Tangibles
- E = Empathy
- R = Responsiveness

The five components of the model are explained below in brief:

- a) Tangibles allude to physical facilities, equipment, and appearance of personnel
- b) Reliability is the organization's ability to perform the promised service dependably and accurately

- c) Responsiveness is the organization's willingness to help the customer and provide prompt service.^[5]
 - d) Empathy is caring and individualized attention paid to the customers
 - e) Assurance is knowhow and courtesy of the firm's employees and their ability to inspire trust and confidence
- a) Tangible:
 - Cleanliness of health center environment
 - The neat and professional appearance of health center staff
 - Visual appealing and comfort of physical facilities
 - Adequacy of equipment in the health center^[7]
 - b) Reliability:
 - When health service is promised, it is done
 - Discipline of staff
 - Delivery of the service right on time
 - Provision of health services when promised
 - c) Responsiveness:
 - Keeping client records correctly without mistake
 - Providing Information when services are performed
 - Provision of prompt service
 - Employees are always willing to help
 - d) Empathy:
 - Giving individual attention to each client
 - Operating hours appropriate for all clients
 - Employees give personal attention to client
 - Employees have client's best interests at heart
 - Understanding the specific needs of clients^[8]
 - e) Assurance:
 - Accessibility of staff when needed
 - An adequate explanation of health-related Problems
 - Feeling security and safety in receiving health care and communication with staff
 - Employee knowledge to answer client questions
 - Courteous and polite behavior towards client ^[9]

WHAT MAKES DIFFERENT IN PRIVATE HOSPITAL SERVICE QUALITIES

- Private hospitals are committed to delivering excellent individual care and customer service to all our private patients.
- Private hospital focus is on providing the highest standards of excellence in healthcare and the private hospitals are to be continued to invest in state-of-the-art technology to deliver the best possible service.
- 98% of our patients rating the health care services as excellent or very good in private hospital.
- Private hospitals are serious about keeping our hospital clean and as a result, the risk of infection to our patients is absolutely minimal.^[10]

DISADVANTAGES

01. Individuals or companies running private health services only look after their own economic interests, they lack human sensitivity or sociability, they run private health services only for-profit purposes .^[11]
02. Private health services are very expensive, due to which they are out of reach of the poor person.
03. Private hospitals are not owned or controlled by the government. Patients have to pay a lot of money for every service.^[12]
04. Private hospitals are provided by private companies; these hospitals are not owned by the government. There are many problems we face in a private hospital:
05. Generally, private hospitals are very expensive. So it will be a bigger burden for those on low incomes to take out health care insurance.

CONCLUSION

As per the outcome of results of the study the major reason of choosing the hospital for treatment was good word-of-mouth from old patients and from senior consultants, infrastructure, proximity of hospital and expert clinical and non-clinical supportive staff. It was found that patients were highly satisfied with the basic amenities, behavior of doctors and staff of the hospital, timely medication, friendly hospital procedures and transparent billing system and findings demonstrated that the more a patient is satisfied the more he/she is expected to recommend the hospital to other patients who need healthcare services. Therefore hospitals should implement patient satisfaction measurement as a quality indicator and thereby actively seek to improve the services provided. All of the SERVQUAL dimensions – tangibles, reliability, responsiveness, empathy, and assurance-significantly impact the service quality gap scores. As such, a service quality gap was evident across the board.

This clearly shows that the service quality needs improvement across the various dimensions. Generally, patients have high expectations from the hospital in terms of service quality, and in reality, it is difficult to deliver on these expectations. Different areas need to be identified, and an action plan needs to be developed to bridge this gap. The silver lining was the revelation that COVID-19 patients fared better than patients with other ailments.^[13] The COVID-19 patients were under focus and received good attention. This is an interesting outcome of this study. The government and authorities have paid active attention to the treatment of COVID-19 patients, and the hospitals have lived up to the expectations to a greater extent. The last finding that private hospitals are doing well compared to those run by trusts is not surprising. Private hospitals, as compared with those run by trusts, are more professionally managed and can provide more attention to the patients. They charge more for their services but at the same time can demonstrate better service quality.

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