IJCRT.ORG ISSN: 2320-2882



INTERNATIONAL JOURNAL OF CREATIVE RESEARCH THOUGHTS (IJCRT)

An International Open Access, Peer-reviewed, Refereed Journal

A study on Patient's attitudes and preferences towards Service Performance (SERVPERF) of private hospitals in Kumbakonam.

KAMALESH BS¹, Prof. RENGANATHAN R²

SASTRA Deemed University, School Of Management, Tirumalaisamudram, Thanjavur- 613401, India.

ABSTRACT

Service marketing refers to the advertising and marketing techniques and strategies especially designed to promote intangible services in place of tangible merchandise. Service marketing encompasses the strategies and procedures employed to promote and deliver intangible offerings to purchasers. Unlike tangible products, services are characterized by their intangibility, inseparability, perishability, and variability. The study deals with the impact of the effectiveness of overall satisfaction level of patients on the SERVQUAL dimensions such as (RATER) Reliability, Assurance, Tangibility, Empathy and Responsiveness. The study relies on the primary data, collected from 347 respondents respectively and from the people who visit the private hospitals in Kumbakonam area. Already high SERVPERF scores can mean a nice phrase-of-mouth referrals and brand awareness, in the same time or even before driving business profits. Non-private hospitals can use SERVPERF model to identify areas in which they have to improve their services as many patients will be coming into a hospital to experience what is provided for them, and they will make the right adjustments to give their patients the experience they deserve. Using SERVPERF, can help the hospital target its audience and obtain feedback on the level of the satisfaction of their carriers. Through that they are allowed to the regions of most concern and thus go on improving the carrier of theirs and introducing effective changes to the experience of their patients. To conclude, the SERVPERF system is really useful in private hospitals because it helps them to not only evaluates the level of care that is offered there, but also to increase it. The collected data were processed using SPSS as well as Smart PLS Software using statistical testing such as chi-square, regression analysis, percentage analysis, correlation analysis, one-way ANOVA, and Factor analysis. The results indicate that the factor variables like reliability, assurance, tangibility, empathy and responsiveness have a great positive internal connection with the happiness that the patients of the hospitals are experiencing.

KEYWORDS

Patient's satisfaction, Service delivery, tangibility, empathy, assurance, reliability, responsiveness, Patient's perception, Service performance, health and service quality.

<u>INTRODUCTION</u>

The Service performance of a hospital is refer to the effectiveness and efficiency with which healthcare services are provided to the patients. Service quality is the measurement of how an organization understands its user's needs and fulfills their expectations. Understanding how to enhance the level of your product's service is crucial for an organization's growth. Measuring and bettering service quality is a valuable skill. In this study, the patient's attitudes and preferences towards service performance of the hospital is measured and analyze their preferences accordingly. The hospital for the research have been chosen based on their market presence, reputation and the range of services they offer. This research will deals with many aspects such as service quality, service performance, infrastructure etc. In today's dynamic healthcare landscape, understanding the patient's attitude and preferences towards service performance in private hospitals is paramount. This analysis delves into the intricate link between perceived service quality and patient satisfaction within the realm of private hospitals.

Various facets of service performance that significantly impact patient's attitudes, including:

<u>Treatment efficacy and clinical expertise</u>: The core aspect of any healthcare service, patients prioritize the effectiveness of treatments and the competence of medical professionals.

<u>Frontline staff interaction</u>: The frontlines team, which consists of nurses, receptionists and other support staff, contributes greatly to the atmosphere of a facility through their reception, manners and sympathy. Efficiency and waiting times: Ensuring short wait and efficient bureaucratic system in provision of services help the beneficiaries assess the quality and convenience offered.

<u>Transparency and cost clarity</u>: Transparent communication on diagnoses, treatments alternatives, and the costs that come with them permits the enhancement of trust and acceptance by the medical errands to be drastically reduced.

<u>Hospital infrastructure and amenities</u>: It is the physical environment like tidiness, comfort, and what to lies around the care center such as access to the basic necessities which impacts the patients' well-being and overall experience.

LITERATURE REVIEW

In Nairobi County, the findings were focused on how the quality and performance environment are interrelated givens that the research was descriptive and cross-sectional in design and data was collected using hospitals. Results revealed that, in large measure, the service quality level and performance of healthcare is highly correlated. This is in addition to, suggestions for staff training and opening branches on a national level. Further research is suggested on a national scale, encompassing additional variables not addressed in this study. Nderitu, C. W. (2016)[1]. The examine in Jordan investigated the impact of fitness service high-quality on patient pleasure in public and personal hospitals. Using a sample of 450 inpatients, they utilized the SERVPERF measure, showing a significant difference in satisfaction between sectors, with private hospitals outperforming public ones. Recommendations included enhancing employee qualifications, regularly

assessing service quality, and establishing post-discharge communication channels with patients to address feedback. Zamil, A. M., Areiqat, A. Y., & Tailakh, W. (2012)[2]. This study in India assessed service quality in small and mediumsized private hospital maternity centers using SERVPERF. With 463 new mothers sampled across three states, findings highlighted the crucial role of reliability in determining maternity of quality of the service. The study underscores the necessity of the results for shaping private healthcare policies and strategies to enhance service quality in hospitals. Amin, Saba & Mohammad, Jamal & Khan, Mohammad. (2022)[3]. This study well evaluates the quality of service in public and private hospitals using a SERVQUALbased questionnaire, comparing dimensions such as empathy, tangibility, reliability, responsiveness and assurance. Results shed light on disparities between public and private sectors, providing insights for healthcare managers striving to enhance service quality amidst global competition. Jabnoun, N., & Chaker, M. (2003)[4]. This study aims to assess SERVQUAL dimensions in public and private hospitals in Northern Cyprus, where literature is scarce on this topic. Six factors—empathy, prioritization of patient needs, staffpatient relationships, professionalism, food quality, and physical environment— are examined. Findings indicate unmet patient expectations in both public and private hospital settings. Arasli, H., Haktan Ekiz, E., & Turan Katircioglu, S. (2008)[5]. Patient perceptions have become an important component in determining the quality of a hospital's service. This have a look at tries to research hospital overall performance from the customer perspective by means of adopting the SERVPERF approach thru 5 variables, particularly tangibles, reliability, guarantee, responsiveness, and empathy, with the motive for identifying and recommending areas that the medical institution needs to recognition on. Setyaningsih, I., & Widagdo, M. B. F. (2023)[6]. The objectives of the research become to decide the distinctive dimensions of the carrier first-class within the private hospitals of Iran and comparing the carrier satisfactory from the sufferers' attitude. The examine questionnaire become the SERVQUAL questionnaire, consisting of 21 items in service nice dimensions. There become a massive difference among the expectations ratings primarily based on gender, schooling degree, and previous hospitalization in that equal medical institution. Zarei, A., Arab, M., Froushani, A. R., Rashidian, A., & Ghazi Tabatabaei, S. M. (2012)[7]. The five provider first-class traits are tangible, guarantee, reliability, responsiveness, and empathy, and they may be being applied across all industries. The primary aim of this observe is to investigate the fine of provider provided by using hospitals in Erbil and the way that affects affected man or woman's delight. The findings discovered that the best cost became assigned to responsiveness as a provider size, at the same time as the bottom cost changed into assigned to assurance as a service size. Ali, B. J., Anwer, R. N. A. D., & Anwar, G. (2021)[8]. The goal of this research was to evaluate the SERVPERF offered by the private hospitals in Pakistan based on patient perceptions. The questionnaire was developed based on the SERVQUAL model, which consists of 22 variables representing all determinants of SERVQUAL. Empathy, tangibility, confidence, timeliness and responsiveness. The statistical analysis of the research represents that SERVQUAL in private hospitals is consistent with patient satisfaction. Irfan, S. M., Ijaz, A., & Shahbaz, S. (2011)[9]. The motive of the paper is to investigate the consequence of the service first-class on the general pleasure of sufferers in non-public hospitals of Tehran, Iran. The examine tells that The price of services, the great of the procedure and the exceptional of interaction had the finest outcomes on the general satisfaction of sufferers, but now not found a considerable impact at the quality of the physical environment on patient pride. Zarei, E., Daneshkohan, A., Pouragha, B., Marzban, S., & Arab, M. (2015)[10].

PROBLEM STATEMENT

To investigate and analyze the factors influencing patient's attitudes and preferences towards the service performance of private hospitals, considering aspects such as medical care quality, communication, accessibility, and overall patient satisfaction, to enhance the understanding towards the SERVQUAL dimensions like Reliability, Tangibility, Responsiveness, Empathy and Assurance in the healthcare service industry and contribute valuable insights for improving service delivery performance in private healthcare institutions.

RESEARCH METHEDOLOGY

The study relies on primary data and it has been collected through a well-structured questionnaire survey method from respondents while keeping in mind the objectives. Primary data has collected by a self-structured questionnaire with questions based on the objectives of the research, the questionnaire contains certain questions regarding patient's attitude, preference and their service expectations provided.

POPULATION

The patients and individuals those who are visiting the hospital located in the Kumbakonam area are the respective population required for this research.

SAMPLE SIZE

Total sample size for this study is 347. The structured questionnaire was prepared and responses were collected by directly visiting the patients of the private hospital and the residential people living in Kumbakonam and collected the data from the people respectively.

PILOT STUDY

A Pilot study was conducted among 25 respondents in the study area to finalize the questionnaire for the main survey.

OBJECTIVES

- To evaluate the demographic profile of the patients such as age, gender, educational qualification and employment status.
- To find out the frequency of visit and primary purpose of visiting the private hospitals.
- To analyze the patient's opinion towards the factors such as Reliability, Tangibility, Responsiveness, Empathy and Assurance.
- To assess the loyalty and overall satisfaction of the patients with the service performance of private hospitals.

HYPOTHESIS

- H1: No significant relationship between the reliability level and overall satisfaction level of patients in private hospitals.
- H2: No significant relationship between the level of tangibility and overall satisfaction level of patients in private hospitals.
- H3: No significant relationship between the level of responsiveness and overall satisfaction of patients in private hospitals.
- H4: No significant relationship between the level of empathy and overall satisfaction level of patients in private hospitals.
- H5: No significant relationship between the level of assurance and overall satisfaction level of patients in private hospitals.

FINDINGS

RESEARCH FRAMEWORK

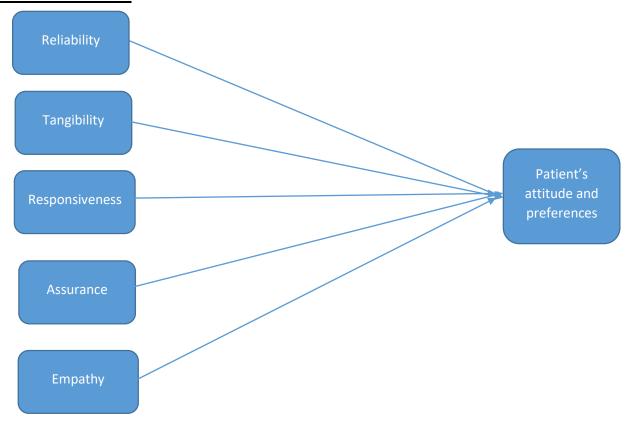


TABLE 1				
Reliability Statistics				
Cronbach's Alpha	N of Items			
0.902	34			
Source: Primary data processed by SPSS IBM 20				

The above table 1, denotes that the cronbach's Alpha is 0.902, which comes under very good internal consistency of data. So, the data are very much reliable. And the questionnaire and data are also valid.

TABLE 2						
Frequency of Demographic Variables						
Age	Frequency Percent Employment status Frequency			Frequency	Percent	
Under 18	20	5.8	Employed full-time	142	40.9	
19 to 24	220	63.4	Employed part-time	4	1.2	
25 to 34	16	4.6	Unemployed	16	4.6	
45 to 54	39	11.2	Students	181	52.2	
55-64	44	12.7	Retired	4	1.2	
65 or above	8	2.3	Total	347	100	
Total	347	100				
Education Qualification	Frequency	Percent	Gender	Frequency	Percent	
High school or below	23	6.6	Male	167	48.1	
Bachelor's Degree	193	55.6	Female	180	51.9	
Master's Degree	119	34.3	Total	347	100	
Doctoral Degree	12	3.5				
Total	347	100				
SOURCE: Primary data processed by SPSS 20						

The above table 2, denotes majority of the respondents are in the age category of 19-24 years old, according to qualification most of them completed Bachelor's degree, In gender most of them are female, and in employment status most are students.

TABLE 3: Age Vs. Patient's Expectations towards the hospital						
Value Asymp. Sig. (2-sided) Decision						
Pearson Chi-Square	12.847	0.025	Null Hypothesis Rejected			
Likelihood Ratio	17.133	0.004	Null Hypothesis Rejected			
Linear-by-Linear Association 9.578 0.002 Null Hypothesis Reject						
N of Valid Cases 347						
SOURCE: primary data processed by SPSS IBM 20						

From the above table 3, if the significance value is less than 0.05 then the null hypothesis is rejected. Here the significance value is 0.025. So we can reject the null hypothesis. Therefore, there is a significance relation between Age and Patient's expectations.

TABLE 4: Correlation between Satisfaction level and Responsiveness level in the services					
	prov	vided			
		Rate your satisfaction level			
		with the services			
		offered by hospitals	Responsiveness		
Rate your satisfaction level with the overall services provided by the hospital	Pearson Correlation	1	.326**		
	Sig. (2-tailed)		.000		
Responsiveness	Pearson Correlation	.326**	1		
	Sig. (2-tailed)	.000			
	N	347	347		

source: primary data processed by SPSS IBM 20

From the above Table 4, it is found that patient's satisfaction level and the Responsiveness of the services are positively correlated. As the significance value is less than 0.05, the null hypothesis is rejected. Therefore, there is a positive relation between patient's satisfaction level and the responsiveness of the services.

Table 5: Regression between Satisfaction level and Empathy level in the service provided						
	В	Std. Error	t	Sig.	R	R Square
(Constant)	2.61	0.226	11.529	0	0.286	0.82

SOURCE: Primary data processed by SPSS IBM 20

From the above table 5, the multiple correlation coefficient 0.286 which measures the degree of relationship between dependent and independent variables. Thus the empathy in our model account for 82% of variance in the dependent variable-satisfaction level. If the significance value is less than 0.05, then the null hypothesis is rejected. Therefore, there is a significance impact on patient's satisfaction level and the empathy level.

Table 6:ANOVA between Age and overall satisfaction of the patients							
	ANOVA						
Gender							
	Sum of Squares	df	Mean Square	F	Sig.		
Between Groups	3.690	4	.922	3.804	.005		
Within Groups	82.939	342	.243				
Total	86.628	346					
SOURCE: Primary data processed by SPSS IBM 20							

We can clearly get to know the F value for the ANOVA between the gender and readiness to suggest is 3.804, where its significance value (p) is less than 0.05. So the null hypothesis is rejected. Therefore there is a significance difference between age and overall satisfaction of the patients.

Table 7 KMO and Bartlett's Test				
Kaiser-Meyer-Olkin Measure of Sampling Adequacy.		.888		
Bartlett's Test of Sphericity	Approx. Chi-Square	4929.904		
	Degrees of freedom	276		
	Sig.	0.000		

From the above table 7, Kaiser-Meyer-Olkin measure of sampling adequacy (MSA) is 0.888 and Bartlett's test of sphericity is significant [Chi-square $x^2(276) = 4929.904$, p<0.001]. The KMO test value (0.888) which is more than 0.5. Thus it is considered acceptable, reliable and valid to implement the data reduction technique.

CONCLUSION

The study here mentioned thus conclude that the patient satisfaction and the tendency of them towards staying loyal to their hospitals relies to a large extent on their general attitude towards the service performance in hospitals. The service quality influence strongly the formation of patient's attitude generally towards the private hospitals, creating acceptance of positive experience and disapproval expectations. According to the private hospitals that are rather excellently performing in some specific areas of service quality, they do have areas for improving, say, communications and waiting times as well as improving the facility amenities, which is meant to better serve the patients and match the expectations. Tailoring the service, listening to the consumer's voice and constantly redirecting efforts are the must be preconditions to face changing desire of patients and be on top of the healthcare market segment. Although the needs that patients come to public

medical institutions for vary, the satisfaction relies on a number of factors. They may be including the overall quality of care, more up-to-date technology, or any better recreation amenities. Determining factors like adequacy of the staff, quality and cost effectiveness of treatment, and the end to end patient experience decide played a crucial role in the choice. Reports come to show that private hospitals tend to better the patients' satisfaction if only they concentrate on both quality healthcare and being talented, patient-focused. Through practicing these mediocre area of service provision such as administration, emergency room doctors and consultations, private hospitals can bring in quality citizens who trust their brand, thus, portraying an image that they are providing a good care. Patient satisfaction can be boosted by means of putting emphasis on patient experience, communication and expense-effectiveness for private hospitals which enhance the development of trust and loyalty among patients. What is advised is do additional research on cost-sharing models and insurance coverage impacting patient's satisfaction. Further, a research on patient perspectives in various departments or concerning specific procedures can be done, which would generate information of great value.

REFERRENCES

Nderitu, C. W. (2016). Service quality and performance of private hospitals in Nairobi County (Doctoral dissertation, University of Nairobi).

Zamil, A. M., Areiqat, A. Y., & Tailakh, W. (2012). The impact of health service quality on patients' satisfaction over private and public hospitals in Jordan: a comparative study. *International Journal of Marketing Studies*, 4(1), 123.

Amin, Saba & Mohammad, Jamal & Khan, Mohammad. (2022). Service Quality in Small and Medium Indian Private Hospitals: Examining Maternity Patients' Perception using SERVPERF Model Service Quality in Small and Medium Indian Private Hospitals: Examining Maternity Patients' Perception using SERVPERF Model. 13. 1284-1294.

Jabnoun, N., & Chaker, M. (2003). Comparing the quality of private and public hospitals. *Managing Service Quality: An International Journal*, 13(4), 290-299.

Arasli, H., Haktan Ekiz, E., & Turan Katircioglu, S. (2008). Gearing service quality into public and private hospitals in small islands: empirical evidence from Cyprus. *International journal of health care quality assurance*, 21(1), 8-23.

Setyaningsih, I., & Widagdo, M. B. F. (2023). Service Performance of Indonesian Private Hospitals: An Empirical Study Using the SERVPERF and IPA Approach. *KINERJA*, 27(2), 294-304.

Zarei, A., Arab, M., Froushani, A. R., Rashidian, A., & Ghazi Tabatabaei, S. M. (2012). Service quality of private hospitals: The Iranian Patients' perspective. *BMC health services research*, 12, 1-7.

Ali, B. J., Anwer, R. N. A. D., & Anwar, G. (2021). Private hospitals' service quality dimensions: The impact of service quality dimensions on patients' satisfaction. *Int. J. Med. Phar. Drug Re*, 7.

Irfan, S. M., Ijaz, A., & Shahbaz, S. (2011). An assessment of service quality of private hospitals in Pakistan: a patient perspective. *Indian Journal of Commerce and Management Studies*, 2(2), 20-34.

Zarei, E., Daneshkohan, A., Pouragha, B., Marzban, S., & Arab, M. (2015). An empirical study of the impact of service quality on patient satisfaction in private hospitals, Iran. *Global journal of health science*, 7(1), 1.