Comparing Public and Private Hospital Health Care -Applicability of SERVQUAL

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Abstract

Now a day's health care is very significant to each and every people because they have to live without any health problem. In case of any disease, hospitals are able to diagnose and give treatment to the patients. This study deals with comparing public and private hospitals health care service. The main focus of the study is service expectations and perceptions of the select hospitals. In these two hospitals, a sample of 400 in-patients is selected to collect the primary data through SERVQUAL model based on convenience sampling. The finding of the study indicates that the perceptions of service in private hospital are higher than the public hospital.

Keywords: SERVQUAL, Doctor, Patient, Hospital, Expectation, Perception, Tangible, Empathy

1. Introduction

Health care services are becoming more important today to prevent the people without being affected by any disease. The medical services in the hospital vary from one hospital to another. The development of medical facilities is influenced not only by the opening of hospitals or medical care centres but more so by their administration and management. If hospitals or health care centres are organized properly, there would be extension in the medical facilities, with the least possible investment. Against to it, if it is found that there are managerial inadequacies even in big hospitals, they can not provide good medical facilities.

India spends about 5% of GDP ¹ on health (as per WHO report 2002) and out of this 5% public expenditure is around 1% and private expenditure is 4% ². Private healthcare is much larger and wide spread than public health service. The number of registered practitioners is estimated to be about 13

lakhs across the country. 3 The allopathic doctors constitute 45% of total registered practitioners and are located mostly in urban areas, whereas non-allopathic doctors are located in rural areas. 4

2. Statement of the problem

The problems are non-availability of medical facility, inadequate competent doctors, nurses and employees, etc. The majority of the population lives in the rural areas who are not aware of the diseases generated by water, bad sanitation and food. On the other hand, the majority of people are affected by heart disease, tuberculosis, dengue fever, AIDS, blood cancer etc. Some of the problems are lack of adequate and timely medical treatment to patients.

3. Objective of the Study

The objective of the study is to analyze the expectations and perceptions service quality of select hospitals by dimension wise.

4. Research Methodology

This study is based on survey method. Data required for this study are primary. Primary data relating to patients of the hospital are collected through personal interview with the patients based on convenience sampling. The interview schedule using SERVQUAL model consists of 44 items: each having two sections: One, the expectations of the patients from the hospitals and the other, the perceptions of the patients. Two hospitals in Salem are purposively selected for the study, ie., one private hospital(Sri Gokulam hospital (P) Ltd.,) and another public hospital(Mohan Kumaramangalam Government Medical College Hospital). In these two hospitals, In these two hospitals, a sample of 400 in-patients (each having 200 samples) are selected to measure the patients' perception of service quality. Average score analysis is used to measure the service quality.

5. Results and Discussions

The gap scores between perceptions and expectations of two hospitals are presented separately for the purpose of identifying individual scores of each hospital dimension-wise. Table 1 indicates the mean scores of perceptions, expectations and gap of public hospital. It shows that the patients' expectations exceed their perceptions with respect to all dimensions and overall service quality score of public hospital. Among the five dimensions, expectations are at the highest (24.51) for Empathy dimension that covers the issue of individual attention and patients' best interest at heart. Expectations

are at the lowest (19.24) for Assurance. On the other hand, the perceptions are at the highest (22.30) in the case of Reliability dimension and the second highest perceptions (22.13) with respect to Empathy followed by 18.04 for, Responsiveness, 17.85 for Assurance and 17.65 for Tangibles. The gap scores (P–E) in respect of all the dimensions are found to be negative and this shows that the patients' perceptions of service quality do not match their expectations. Hence it can be concluded that the public sector hospital should improve their service so as to meet the patients' expectations.

Further, an analysis is made to study the mean scores of private hospital dimension-wise. Table 2 describes that the expectations of the patients are fulfilled by the service providers in the case of dimensions Tangibles, Reliability, Responsiveness and Empathy and also of the overall service quality. In the case of Assurance dimension, expectations are not fulfilled. That is the service provider is not able to meet the expectations of the patients with regard to instilling confidence in patients, a feeling safety of dealings with the hospital, consistently courteous with their patients and explaining and answering patients' questions. However, overall gap score indicates that the perceptions are higher than the expectations when all the dimensions are combined together. From the above analysis, it can be concluded that the private hospital provides better service than public hospital. Generally, the private hospital is providing the expected service to the patients. Hence, it can be said that all the dimensions require more attention by the public hospital management if the gaps are to be closed. Whereas in the case of private hospital, the serious shortfall in respect of dimension Assurance (-2.40) requires much attention to close the gap.

6. Survey Findings

When the personal interviews with the patients are held, the following responses are observed and they are presented dimension- wise.

6.1Tangibles

Most of the patients in the public hospital are happy about the modern equipment, room facility, billing system etc. However, some of the patients feel that even though the inside environment of the hospitals are conducive enough, there is disturbance due to noise from the crowded patients. Since most of the patients admitted are trauma patients, they feel that toilet facility should be inside the rooms rather than outside. Some of the patients are dissatisfied regarding the toilet facility and bed arrangements. Some of patients of private hospital have felt the need for telephone facility (at least one in each floor). They are also happy about the inside room environment for the patients and the rest room for their attendants. Since most of the aged patients are admitted due to sugar complaints, it is felt that diet food should be provided by the hospital itself rather than brought from outside.

6.2 Reliability

Even though most of patients have expressed their satisfaction regarding the correct diagnosis and prompt treatment at the private hospital, the patients are not happy about the fixing of dates for surgeries. Almost all the patients are dissatisfied about the services provided at the public hospital and they expect error-free service and fast retrieval documents, good communication and good treatment.

The patients admitted to the public hospital are not fully satisfied about the emergency care, casualty service, correct, diagnosis, prompt treatment etc., whereas in the case of private hospital, the patients are happy about them.

6.3 Responsiveness

Some patients have expressed dissatisfaction as to not getting information on the type of service facilities and also getting prompt service (Public hospital). Most of patients are satisfied about the willingness of hospital personnel to help patients always (Private hospital). Most of the patients are not happy with the delayed discharge procedure (Public hospital). However all the patients are happy about the quick response to the emergency attending of the hospital personnel.

6.4 Assurance

In the personal interviews with the patients, it is brought to light that most of the patients are happy about the excellent nursing care, assistance in the reception, empathetic staff, ever smiling-ever ready helpers in both the hospitals. A few of the patients feel that the hospital charges are high (Private hospital), but at the same time some of them expressed that cost cannot be considered for the excellent quality of service offered by the hospital. Most of the patients are dissatisfied with the paramedical staff as they are not technically sound and also about briefings (Private hospital). With regard to public hospital some of the patients are not happy about doctors' treatment and also about nursing care.

6.5 Empathy

Even though most of the patients feel that there is excellent pre and post-operative care rendered by doctors, nurses and dieticians and good sympathetic care (Two hospitals), some of the patients are dissatisfied with respect to operating hours according to the requirement of the patients in the public hospital. Almost all the patients are satisfied regarding the individual attention given by the staff, nurses, ward boys etc., in the private hospital. During the personal interactions with the patients in the public sector hospital, they have expressed their dissatisfaction regarding discrimination in treatment by ward boys and some nursing staff between the general and special ward patients, accounting for negative scores for Empathy.

7. Conclusion

The above discussion shows the patients' satisfaction / dissatisfaction about the healthcare service provided by the hospitals with respect to five SERVQUAL dimensions. Most of patients' of the private hospital are highly satisfied with the service compared to the public hospital's service. Statistically, the negative gap is higher in the case of public hospital as the expectations exceeded their perceived service.

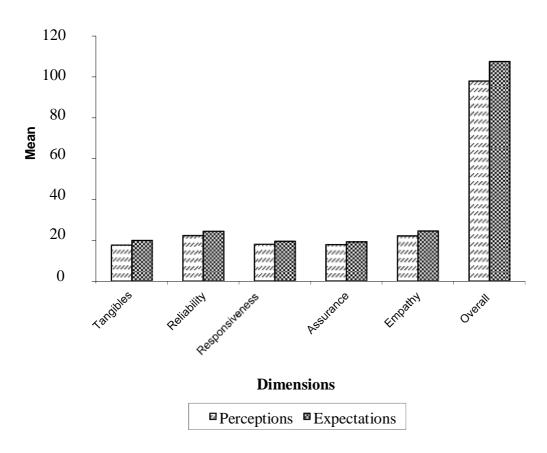
 $TABLE-1 \\ SERVQUAL\ SCORES\ BY\ DIMENSIONS\ FOR\ PUBLIC\ HOSPITAL\ (N=200)$

Dimensions	Mean value of	Mean value of	Difference
	Perception	Expectations score	(P-E)
	s score		
Tangibles	17.65	19.92	-2.2750
Reliability	22.30	24.38	-2.0850
Responsiveness	18.04	19.49	-1.4550
Assurance	17.85	19.24	-1.3850
Empathy	22.13	24.51	-2.3800
Overall service	97.9650	107.53	-9.5700
quality Index			

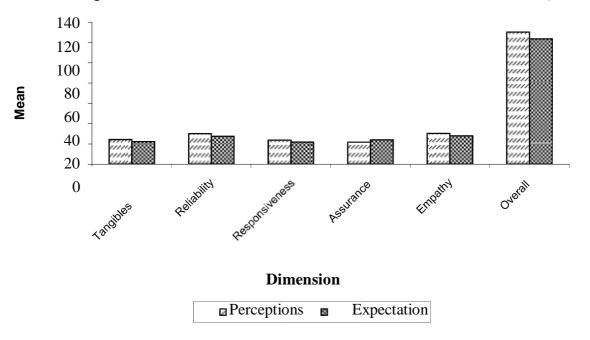
 $TABLE-2 \\ SERVQUAL \ SCORES \ BY \ DIMENSIONS \ FOR \ PRIVATE \ HOSPITAL \ (N=200)$

Dimensions	Mean value of	Mean value of	Difference
	Perceptions score	Expectations score	$(\mathbf{P} - \mathbf{E})$
Tangibles	24.38	22.27	2.1050
Reliability	30.18	27.47	2.7050
Responsiven	23.71	21.84	1.8750
Assurance	21.62	24.03	-2.4050
Empathy	30.30	27.86	2.4400
Overall service	130.1850	123.47	6.7200

 $\label{eq:figure-1} \textbf{FIGURE-1} \\ \textbf{SERVQUAL SCORES BY DIMENSIONS FOR PUBLIC HOSPITAL (N=200)} \\$



 $FIGURE-2 \\ SERVQUAL \ SCORES \ BY \ DIMENSIONS \ FOR \ PRIVATE \ HOSPITAL \ (N=200)$



References

- 1. Priya Deshpande, "Service Quality Perspective and Satisfaction in health care system A study of select hospitals in Hyderabad". *The Indian Journal of Marketing*, Vol.XXXVI, No.4, April 2006, Jagriti Offset Press, p.3
- 2. Ibid., p. 3
- 3. Ibid., p. 3
- 4. Ibid., p. 3
- 5. Krishnasamy, O.R. and Ranganathan.M., *Methodology of Research In Social Sciences*, Mumbai: Himalaya Publishing House, 2005.
- 6. Srinivasan, R., Services Marketing, New Delhi: Prentice Hall of India (P) Ltd., 2004.
- 7. Parasuraman, A. Zeithaml, V.A. and Berry, L.L., "A Conceptual Model of Service Quality and its
 - Implications for Future Research" Journal of Marketing, Vol.49, fall, 1985, pp.41-50.
- 8. Parasuraman, A. Zeithaml, V.A. and Berry, L.L., "SERVQUAL: a multiple item scale for measuring customer perceptions of service quality", *Journal of Retailing 64*, Spring, 1988, pp.12-40.
- 9. Parasuraman, A. Zeithaml, V.A. and Berry, L.L., "Refinement and re-assessment of the SERVQUAL
 - scale", Journal of Retailing, 67(4), 1991, pp.12-40.
- 10. Parasuraman, A. et. al., "More on Improving Service Quality Measurement", *Journal of Retailing*, Vol.69(1), 1993, pp.140-147.
- 11. Parasuraman, A. et. al., "Re-assessment of expectations as a comparison standard in measuring service quality: Implications for future research", *Journal of Marketing*, 58, 1994, pp.111-124.