



# A Study on Service Quality Perception of the Patients with Respect to the Delivery of Health Services at Apollo Hospital, Mysuru

Meghashree .K .A<sup>1</sup>, Govinda Gowda .H .G<sup>2</sup>

M.Com Student<sup>1</sup>, Guide<sup>2</sup>

Department of Commerce

Mount Carmel College (Autonomous), Bengaluru, Karnataka, India

## I. INTRODUCTION

Service Quality, Customer Expectation and Customer Perception are very important components of competitive advantage in the health care sector this service quality method is widely used for assessing the quality expected by the patients and the quality of services actually provided. The need to establish quality standards for services and findings of studies focused on this process have led to the creation of various models illustrating the dynamic relationship between quality factors. The models constituted a basis for developing a service quality assessment method for evaluating both the potential and the outcome of the process. The method is used to identify the high quality factors and measure the customer expectations and customer perception. Quality management is an approach in which quality takes precedence over the other issues and is treated as a priority. For this reason, synthetic methods, such as gap methods, are important in creating and assuring quality in services.

## II. REVIEW OF LITERATURE

1.Parasuraman, Berry and Zeithaml (1985) have introduced five specific dimensions of service quality which apply regardless of service industry viz, assurance, responsiveness, tangibles, empathy and reliability. They have devised a scale called SERVQUAL since there were several models (scales) for the measurement of service quality and the satisfaction of customers, they are often too generalized or ad hoc, and as such hard to apply in the hospitality industry. On the other hand TQM, which began before in all companies that dealt with products, due to the specificities of services due to factors such as impalpability, inseparability from provider and receiver of service and perishability, a specific concept called SERVQUAL (SERVices QUALity Model) was created.

2.It is a known fact that profits are directly linked to service quality and productivity especially in service operations where customers have active role to play in delivery of services and has direct impact not only on the service provider but on the entire network. This highlights the assessment of returns on relationships in relationship marketing, the concept introduced by Gummesson (1998).

3.Rameshan (2004), aimed to study the quality of service of primary health centres. He reveals that the services rendered by PHCs are deficient in many respects in the perception of customers and community members of the villages and that the doctors and the staff are unable to redress adequately the grievances raised by villagers. Villagers do not like the panchayat coming into the picture for improving the services of PHCs, district officials totally discount privatization as a

means for providing effective primary health care in natural areas.

## III. STATEMENT OF THE PROBLEM

This study is to find out the quality of service provided in the hospitals, but due the differences in the expectations and perceptions that the patients have in the quality of service provided by the hospitals and different people have different views regarding the services provided. Patients have a totally different perception regarding the services provided by few of the hospitals, lack of certain issues relating to the hospitals, certain disparities in the higher authorities and many other matters differ in reality. Services provided at the hospitals act as very important matter as it relates the life of an individual. Day by day the competitiveness in the hospital industry is ever increasing and the hospital has to be very dynamic in adopting the recent trends in providing effective service to their patients.

## IV. OBJECTIVES OF STUDY

- To analyse and interpret the perception that the patients have on the service quality provided by the Apollo hospital.
- To understand the difference between the expectations the patients have on the service provided and the actual service provided by the hospitals.
- To study the quality of service provided by the hospitals.
- To know the importance of the quality of service as it is very important with reference to the people.
- To know the working environment in the fields of hospital.
- To study the importance of employee satisfaction as it indirectly has an impact on the quality of service provided to the patients.

## V. SCOPE OF THE STUDY

The study helps to know about the pros and cons of the service quality delivered by the hospitals to its patients. Helps to know about the differences between the expectations and the perceptions the patients have on the delivery of health services.

## VI. DATA COLLECTION

The data collected in this study is conclusive and analytical in nature. In this study, the method of data collection incorporates the collection of both Primary data and Secondary data for an in depth investigation.

### Primary Data

Primary data is a measurement that has been conserved and recorded as a part of an original study. This method of study or the data is from the original source that is first hand information and investigation of the primary data which plays a crucial role in understanding the delivery of service to the employees as well as the patients

### Secondary Data

Secondary data is a published data that is collected in the past or the other parties. This method of collection of data involved

in the study is through the different sources like the internet, books of the organization and other research papers.

## VII. SAMPLE DESIGN

### Sample Size

A simple random sample method has adopted to collect the data from the respondents. The information is gathered from 50 respondents.

### Sampling Technique

The sampling technique used in this study is the Simple Random Sampling to determine the accuracy of survey results.

## VIII. DEMOGRAPHICS OF THE SAMPLE

Table.1. Age

	Frequency	Percent	Cumulative Percent
18-29 yrs	14	28.0	28.0
30-39 yrs	21	42.0	70.0
40 yrs& above	15	30.0	100.0
Total	50	100.0	

The structured questionnaires were administered to a total number of 50 respondents in Mysuru. The responses given by the 50 respondents were productive and useful for our research. According to the frequency calculation the 28%

respondents belong to 18-29 yrs category, 42% respondents belong to the age group of 30-39 yrs and 30% respondents belong to 40 yrs category. According to the results the majority of the respondents belong to 40 years and above category.

Table.2. Gender

	Frequency	Percent	Cumulative Percent
Male	26	52.0	52.0
Female	24	48.0	100.0
Total	50	100.0	

According to the above table, the percentage of male respondents is more with 52% and the female with 48%. Through this we can conclude that there are more male patients visiting the hospital.

Table.3. Category of Customers

	Frequency	Percent	Cumulative Percent
Patient	21	42.0	42.0
Attendees of Patient	16	32.0	74.0
Visitors of the Patient	13	26.0	100.0
Total	50	100.0	

According to the above table, more responses were collected by the patients with 42%, as we wanted the accurate information regarding the service quality and even the patients were in the condition to provide or respond to the questionnaire.

Table. 4. Visiting Time of the Respondents

	Frequency	Percent	Cumulative Percent
Once in a Week	20	40.0	40.0
Once in a Month	13	26.0	66.0
During Illness	17	34.0	100.0
Total	50	100.0	

According to the above table the more percentage of respondents visited the hospital once in a week with 40%, respondents visited once in a month with 26% and 34 respondents visited during illness.

**Table.5. Type of Service Availed in the Hospital**

	Frequency	Percent	Cumulative Percent
Regular Check up	6	12.0	12.0
OPD	16	32.0	44.0
Consultancy	18	36.0	80.0
Other Services	10	20.0	100.0
Total	50	100.0	

According to the above table, the services availed by the respondents was Consultancy, with 36%, OPD with 32%, other services with 20% and Regular check-up with 12%. This concludes that most of the respondents availed the consultancy services and least of the respondents availed regular check-ups from the hospital.

**IX. DESCRIPTIVE STATISTICS**

The respondents were requested to rate their level of agreement with a set of statements using a 5-point Like scale from 5 (strongly agree) to 1 (strongly disagree), the consequent responses obtained in this regard were presented in Table 1 along with the results of Independent Sample T-Test method.

Two sections appear in the output, **Group Statistics** and **Independent Sample T-Test**. The first section, **Group Statistics**, provides basic information about the group comparisons, including the sample size (*n*), mean, standard deviation and standard error for:

**Q1:** Adequacy of overall security prevailed in the hospital. Here there are 26 Male respondents and 24 Female respondents. The mean for Male respondents is 4.12 and for Female respondents it is 4.08.

**Q2:** Level of availability of medical equipments in proper working condition. Here there are 26 Male respondents and 24 Female respondents. The Mean for Male respondents is 4.12 and for Female respondents it is 4.08.

**Table .6. Group Statistics**

	Gender	N	Mean	Std. Deviation	Std. Error Mean
Adequacy of overall security prevailed in the hospital	Male	26	4.12	1.071	.210
	Female	24	4.08	1.139	.232
Level of availability of medical equipments in proper working condition	Male	26	4.12	1.033	.202
	Female	24	4.08	1.100	.225

The second section, **Independent Samples T-Test**, displays the results most relevant to the Independent Samples *t* Test. There are two parts that provide different pieces of information.

(A) Levene’s Test for Equality of Variances.

(B) T-Test for Equality of Means.

**Table .7. Independent Sample Test**

		Levene’s test for equality of Variance		T-Test for Equality of Means						
		f	Sig.	T	df	Sig. (2 Tailed)	Mean Difference	Std. Error Difference	95% Confidence Interval of the Difference	
									Lower	Upper
Adequacy of overall security prevailed in the hospital	Equal Variances assumed	.286	.595	.103	48	.919	.032	.312	-.596	.660
	Equal Variances not-Assumed			.102	47.034	.919	.032	.313	-.598	.662
Availability of medical equipments in proper working condition	Equal Variances assumed	.220	.642	.106	48	.916	.032	.302	-.574	.638
	Equal Variances not-assumed			.106	47.014	.916	.032	.302	-.576	.640

(A) As a result of the above table, in both the questions, the female respondents are not significantly different than that of

the male respondents. We can conclude by considering the “Equal Variances assumed”.

(B) The sign of Mean difference corresponds to the sign of  $t$  value. The positive  $t$  value indicates that the:

Q1. Adequacy of overall security prevailed in the hospital and

Q2. Availability of medical equipments in proper working condition, for the first group, Male respondents, is significantly greater than the Mean for the second group, Female respondents.

(C) Confidence Interval of the Difference contains 0 in the above result; therefore, the results are not significant at the chosen significance level.

**To conclude:**

There was no significant difference between the Male respondents and Female respondents. Therefore, the average security prevailed in the hospital and the availability of medical equipments in proper condition in the perspective of Female respondents was .032% more than that of Male respondents.

**X. FINDINGS AND SUGGESTIONS**

According to the analysis there is no significant difference in the variables taken into consideration with relation to the gender. Service quality is the main aspect with relation to the hospital industry, the Apollo hospital has a very good reputation and the patients perception on the service quality is high and the services what they avail are not very much matching to their perceptions. The hospital should however work on few sectors in order to gain the positive perception of the patients and fill the gap between the perception and the actual experience. Both the Male respondents and the Female respondents have almost the same views regarding the quality of services provided by the hospital. Therefore, the managers and the responsible people should work on the areas where attention is required and should adopt to the more dynamic and advanced services.

**XI. CONCLUSION**

Any hospital, for that matter, should focus on providing the best services to its patient's in order to be at the top place. People first look at the extent to which the service provided is good and reliable. Therefore, all the areas where the Apollo hospital should give importance to should starts filling the gaps and implement the changes required in order to be effective in their service quality. At the end of the day, the patient's should be satisfied with the service provided and they should be cured with the diseases that they had prior. The gap between the expectation of the service quality by the patients and their actual experiences with the hospital's service quality should be filled.

**XII. REFERENCES**

[1].[https://www.researchgate.net/publication/305916250\\_Assessment\\_of\\_Service\\_Quality\\_in\\_Health\\_Care\\_Sector\\_A\\_Survey\\_of\\_Patients](https://www.researchgate.net/publication/305916250_Assessment_of_Service_Quality_in_Health_Care_Sector_A_Survey_of_Patients)

[2]. <https://mysore.apollohospitals.com>

[3]. <https://www.apollohospitals.com>

[4].<https://www.slideshare.net/mobile/HarshaRathore/presentation-harsha>

[5].<https://www.questionpro.com/survey-templates/services-quality-evaluation/>

[6]. [Home.ubalt.edu/ntsbmilb/survey/customer.HTM](http://Home.ubalt.edu/ntsbmilb/survey/customer.HTM)

[7]. Parasuraman A., Zeithaml V., & Berry L, (1988), "SERQUAL: A Multiple-item Scale for Measuring Consumer Perceptions of Service Quality" *Journal of Retailing, Vol,64 (1)*, pp 12-40.

[8]. Rameshan, P, (2004), "Quality of Primary Health Centers: Insights from a Field Study", *VIKALPA*, Vol. 29(3), pp 71-82.

[9].[https://www.researchgate.net/publication/309900682\\_Service\\_quality\\_in\\_Mysore\\_hospitals\\_-\\_an\\_empirical\\_study](https://www.researchgate.net/publication/309900682_Service_quality_in_Mysore_hospitals_-_an_empirical_study)

[10].[https://www.researchgate.net/pub;ication/309900682\\_Service\\_quality\\_in\\_Bangalore\\_hospitals\\_-\\_an\\_empirical\\_study](https://www.researchgate.net/pub;ication/309900682_Service_quality_in_Bangalore_hospitals_-_an_empirical_study)