

INTERNATIONAL JOURNAL OF RESEARCH IN COMMERCE & MANAGEMENT

I
J
R
C
M



A Monthly Double-Blind Peer Reviewed (Refereed/Juried) Open Access International e-Journal - Included in the International Serial Directories

Indexed & Listed at:

Ulrich's Periodicals Directory ©, ProQuest, U.S.A., EBSCO Publishing, U.S.A., Cabell's Directories of Publishing Opportunities, U.S.A., Google Scholar,

Open J-Gate, India [link of the same is duly available at Inlibnet of University Grants Commission (U.G.C)],

The American Economic Association's electronic bibliography, EconLit, U.S.A.,

Index Copernicus Publishers Panel, Poland with IC Value of 5.09 & number of libraries all around the world.

Circulated all over the world & Google has verified that scholars of more than 4945 Cities in 183 countries/territories are visiting our journal on regular basis.

Ground Floor, Building No. 1041-C-1, Devi Bhawan Bazar, JAGADHRI – 135 003, Yamunanagar, Haryana, INDIA

<http://ijrcm.org.in/>

CONTENTS

Sr. No.	TITLE & NAME OF THE AUTHOR (S)	Page No.
1.	HIGHER EDUCATION INSTITUTIONS PERSPECTIVES ON LINKAGES WITH THE INDUSTRY IN NIGERIA <i>DR. MILINDO CHAKRABARTI, DR. HARI SHANKAR SHYAM & MBONU CHIKWELU MADUABUCHI</i>	1
2.	PRIORITIZING CRITICAL FACTORS IN DELIVERING QUALITY SERVICES TO PATIENTS <i>SUGANDHA SIROHI & RAJENDRA SINGH</i>	8
3.	EDUCATION & WOMEN EMPOWERMENT ARE INTER RELATED: AN OVERVIEW <i>DR. RADHA GUPTA</i>	11
4.	IMPACT OF GLOBAL OIL EQUILIBRIUM ON INDIAN ECONOMY <i>DR. M. SELVARAJ</i>	13
5.	THE IMPACT DEGREE OF SOCIAL CAUSES OF POVERTY ON THE TRENDS OF CITIZENS OF AL-MAFRAQ GOVERNORATE, JORDAN <i>SALEH GNEAAN ALMASAEED & TORKI M. AL-FAWWAZ</i>	15
6.	THE DETERMINANTS OF PROFITABILITY: AN EMPIRICAL INVESTIGATION ON SUN PHARMA <i>P. SATHYA & DR. A. VIJAYAKUMAR</i>	20
7.	SERVICE QUALITY OF PUBLIC SECTOR BANKS: A CASE OF DOMESTIC MIGRANT LABOR IN KERALA <i>AHAMED RIAZ K & DR. T. C. SIMON</i>	24
8.	ANALYSIS OF SOCIO-ECONOMIC BENEFIT OF ELECTRIFICATION THROUGH CRED A IN CHHATTISGARH STATE <i>SUMONA BHATTACHARYA & DR. R. P. AGARWAL</i>	29
9.	EFFECTIVENESS OF DISTRIBUTION CHANNELS: INTERNET IN SERVICE DELIVERY WITH REFERENCES TO INDIA <i>ANUBHAV SINGH & ADITI PANDEY</i>	34
10.	LEARNING ORGANIZATION AND ITS IMPACT ON ORGANIZATIONAL EFFECTIVENESS: A LITERATURE REVIEW <i>ESHA SINGH</i>	37
11.	IPO PROCESS IN INDIA <i>NARENDRASINH B. RAJ</i>	40
12.	IMPACT ASSESSMENT OF FRINGE BENEFITS IN JOB SATISFACTION AND EMPLOYEES' ATTITUDE <i>R. SARANYA.</i>	43
13.	INTERNET SHOPPING: FACTORS INFLUENCING STUDENTS BUYING INTENTION ONLINE <i>ANUPAMA SUNDAR D</i>	47
14.	ROLE OF PRODUCT AND SERVICES ON SATISFACTION OF CUSTOMERS: A CASE STUDY OF ASIAN PAINTS <i>PARINDA V. DOSHI</i>	55
15.	A LITERATURE REVIEW ON CORPORATE SOCIAL RESPONSIBILITY: SOCIAL IMPACT OF BUSINESS <i>DR. TARUNLATA</i>	58
16.	TREND OF INTERNAL FINANCING IN INDIAN CORPORATE SECTOR: A STUDY OF CEMENT AND CEMENT PRODUCT INDUSTRY <i>SANKAR PAUL</i>	60
17.	ANALYZING THE WEAK FORM MARKET EFFICIENCY AND PERFORMANCE OF SELECTED INDIAN IT STOCKS <i>DR. RAJNI SOFAT</i>	64
18.	A STUDY ON WORK LIFE BALANCE OF MARRIED WOMEN IN BANKING SECTOR IN MUMBAI <i>PRAJAKTA DHURU</i>	69
19.	TARGET ORIENTED COMPETITIVE INTELLIGENCE PRACTICE AND PERFORMANCE OF FIRMS LISTED ON THE NAIROBI SECURITIES EXCHANGE, KENYA <i>PAUL WAITHAKA, HANNAH BULA & LINDA KIMENCU</i>	75
20.	A BRIEF REVIEW OF EMPLOYEE ENGAGEMENT: DEFINITION, ANTECEDENTS AND APPROACHES <i>SWATI MEGHA</i>	79
	REQUEST FOR FEEDBACK & DISCLAIMER	89

CHIEF PATRON**PROF. K. K. AGGARWAL**

Chairman, Malaviya National Institute of Technology, Jaipur
 (An institute of National Importance & fully funded by Ministry of Human Resource Development, Government of India)
 Chancellor, K. R. Mangalam University, Gurgaon
 Chancellor, Lingaya's University, Faridabad
 Founder Vice-Chancellor (1998-2008), Guru Gobind Singh Indraprastha University, Delhi
 Ex. Pro Vice-Chancellor, Guru Jambheshwar University, Hisar

FOUNDER PATRON**LATE SH. RAM BHAJAN AGGARWAL**

Former State Minister for Home & Tourism, Government of Haryana
 Former Vice-President, Dadri Education Society, Charkhi Dadri
 Former President, Chinar Syntex Ltd. (Textile Mills), Bhiwani

FORMER CO-ORDINATOR**DR. S. GARG**

Faculty, Shree Ram Institute of Business & Management, Urjani

ADVISORS**PROF. M. S. SENAM RAJU**

Director A. C. D., School of Management Studies, I.G.N.O.U., New Delhi

PROF. M. N. SHARMA

Chairman, M.B.A., Haryana College of Technology & Management, Kaithal

PROF. S. L. MAHANDRU

Principal (Retd.), Maharaja Agrasen College, Jagadhri

EDITOR**PROF. R. K. SHARMA**

Professor, Bharti Vidyapeeth University Institute of Management & Research, New Delhi

CO-EDITOR**DR. BHAVET**

Faculty, Shree Ram Institute of Engineering & Technology, Urjani

EDITORIAL ADVISORY BOARD**DR. RAJESH MODI**

Faculty, Yanbu Industrial College, Kingdom of Saudi Arabia

PROF. SANJIV MITTAL

University School of Management Studies, Guru Gobind Singh I. P. University, Delhi

PROF. ANIL K. SAINI

Chairperson (CRC), Guru Gobind Singh I. P. University, Delhi

DR. SAMBHAVNA

Faculty, I.I.T.M., Delhi

DR. MOHENDER KUMAR GUPTA

Associate Professor, P. J. L. N. Government College, Faridabad

DR. SHIVAKUMAR DEENE

Asst. Professor, Dept. of Commerce, School of Business Studies, Central University of Karnataka, Gulbarga

ASSOCIATE EDITORS

PROF. NAWAB ALI KHAN

Department of Commerce, Aligarh Muslim University, Aligarh, U.P.

PROF. ABHAY BANSAL

Head, Department of I.T., Amity School of Engineering & Technology, Amity University, Noida

PROF. V. SELVAM

SSL, VIT University, Vellore

PROF. N. SUNDARAM

VIT University, Vellore

DR. PARDEEP AHLAWAT

Associate Professor, Institute of Management Studies & Research, Maharshi Dayanand University, Rohtak

DR. S. TABASSUM SULTANA

Associate Professor, Department of Business Management, Matrusri Institute of P.G. Studies, Hyderabad

DR. JASVEEN KAUR

Asst. Professor, University Business School, Guru Nanak Dev University, Amritsar

FORMER TECHNICAL ADVISOR

AMITA

Faculty, Government M. S., Mohali

FINANCIAL ADVISORS

DICKIN GOYAL

Advocate & Tax Adviser, Panchkula

NEENA

Investment Consultant, Chambaghat, Solan, Himachal Pradesh

LEGAL ADVISORS

JITENDER S. CHAHAL

Advocate, Punjab & Haryana High Court, Chandigarh U.T.

CHANDER BHUSHAN SHARMA

Advocate & Consultant, District Courts, Yamunanagar at Jagadhri

SUPERINTENDENT

SURENDER KUMAR POONIA

CALL FOR MANUSCRIPTS

We invite unpublished novel, original, empirical and high quality research work pertaining to the recent developments & practices in the areas of Computer Science & Applications; Commerce; Business; Finance; Marketing; Human Resource Management; General Management; Banking; Economics; Tourism Administration & Management; Education; Law; Library & Information Science; Defence & Strategic Studies; Electronic Science; Corporate Governance; Industrial Relations; and emerging paradigms in allied subjects like Accounting; Accounting Information Systems; Accounting Theory & Practice; Auditing; Behavioral Accounting; Behavioral Economics; Corporate Finance; Cost Accounting; Econometrics; Economic Development; Economic History; Financial Institutions & Markets; Financial Services; Fiscal Policy; Government & Non Profit Accounting; Industrial Organization; International Economics & Trade; International Finance; Macro Economics; Micro Economics; Rural Economics; Co-operation; Demography; Development Planning; Development Studies; Applied Economics; Development Economics; Business Economics; Monetary Policy; Public Policy Economics; Real Estate; Regional Economics; Political Science; Continuing Education; Labour Welfare; Philosophy; Psychology; Sociology; Tax Accounting; Advertising & Promotion Management; Management Information Systems (MIS); Business Law; Public Responsibility & Ethics; Communication; Direct Marketing; E-Commerce; Global Business; Health Care Administration; Labour Relations & Human Resource Management; Marketing Research; Marketing Theory & Applications; Non-Profit Organizations; Office Administration/Management; Operations Research/Statistics; Organizational Behavior & Theory; Organizational Development; Production/Operations; International Relations; Human Rights & Duties; Public Administration; Population Studies; Purchasing/Materials Management; Retailing; Sales/Selling; Services; Small Business Entrepreneurship; Strategic Management Policy; Technology/Innovation; Tourism & Hospitality; Transportation Distribution; Algorithms; Artificial Intelligence; Compilers & Translation; Computer Aided Design (CAD); Computer Aided Manufacturing; Computer Graphics; Computer Organization & Architecture; Database Structures & Systems; Discrete Structures; Internet; Management Information Systems; Modeling & Simulation; Neural Systems/Neural Networks; Numerical Analysis/Scientific Computing; Object Oriented Programming; Operating Systems; Programming Languages; Robotics; Symbolic & Formal Logic; Web Design and emerging paradigms in allied subjects.

Anybody can submit the **soft copy** of unpublished novel; original; empirical and high quality **research work/manuscript** **anytime** in **M.S. Word format** after preparing the same as per our **GUIDELINES FOR SUBMISSION**; at our email address i.e. infoijrcm@gmail.com or online by clicking the link **online submission** as given on our website ([FOR ONLINE SUBMISSION, CLICK HERE](#)).

GUIDELINES FOR SUBMISSION OF MANUSCRIPT

1. **COVERING LETTER FOR SUBMISSION:**

DATED: _____

THE EDITOR

IJRCM

Subject: SUBMISSION OF MANUSCRIPT IN THE AREA OF _____.

(e.g. Finance/Mkt./HRM/General Mgt./Engineering/Economics/Computer/IT/ Education/Psychology/Law/Math/other, please specify)

DEAR SIR/MADAM

Please find my submission of manuscript titled ' _____ ' for likely publication in one of your journals.

I hereby affirm that the contents of this manuscript are original. Furthermore, it has neither been published anywhere in any language fully or partly, nor it is under review for publication elsewhere.

I affirm that all the co-authors of this manuscript have seen the submitted version of the manuscript and have agreed to inclusion of their names as co-authors.

Also, if my/our manuscript is accepted, I agree to comply with the formalities as given on the website of the journal. The Journal has discretion to publish our contribution in any of its journals.

NAME OF CORRESPONDING AUTHOR	:
Designation/Post*	:
Institution/College/University with full address & Pin Code	:
Residential address with Pin Code	:
Mobile Number (s) with country ISD code	:
Is WhatsApp or Viber active on your above noted Mobile Number (Yes/No)	:
Landline Number (s) with country ISD code	:
E-mail Address	:
Alternate E-mail Address	:
Nationality	:

* i.e. Alumnus (Male Alumni), Alumna (Female Alumni), Student, Research Scholar (M. Phil), Research Scholar (Ph. D.), JRF, Research Assistant, Assistant Lecturer, Lecturer, Senior Lecturer, Junior Assistant Professor, Assistant Professor, Senior Assistant Professor, Co-ordinator, Reader, Associate Professor, Professor, Head, Vice-Principal, Dy. Director, Principal, Director, Dean, President, Vice Chancellor, Industry Designation **etc.** **The qualification of author is not acceptable for the purpose.**

NOTES:

- a) The whole manuscript has to be in **ONE MS WORD FILE** only, which will start from the covering letter, inside the manuscript. **pdf. version is liable to be rejected without any consideration.**
 - b) The sender is required to mention the following in the **SUBJECT COLUMN of the mail:**
New Manuscript for Review in the area of (e.g. Finance/Marketing/HRM/General Mgt./Engineering/Economics/Computer/IT/ Education/Psychology/Law/Math/other, please specify)
 - c) There is no need to give any text in the body of the mail, except the cases where the author wishes to give any **specific message** w.r.t. to the manuscript.
 - d) The total size of the file containing the manuscript is expected to be below **1000 KB**.
 - e) Only the **Abstract will not be considered for review** and the author is required to submit the **complete manuscript** in the first instance.
 - f) **The journal gives acknowledgement w.r.t. the receipt of every email within twenty-four hours** and in case of non-receipt of acknowledgment from the journal, w.r.t. the submission of the manuscript, within two days of its submission, the corresponding author is required to demand for the same by sending a separate mail to the journal.
 - g) The author (s) name or details should not appear anywhere on the body of the manuscript, except on the covering letter and the cover page of the manuscript, in the manner as mentioned in the guidelines.
2. **MANUSCRIPT TITLE:** The title of the paper should be typed in **bold letters, centered and fully capitalised**.
 3. **AUTHOR NAME (S) & AFFILIATIONS:** Author (s) **name, designation, affiliation (s), address, mobile/landline number (s), and email/alternate email address** should be given underneath the title.
 4. **ACKNOWLEDGMENTS:** Acknowledgements can be given to reviewers, guides, funding institutions, etc., if any.
 5. **ABSTRACT:** Abstract should be in **fully Italic printing**, ranging between **150 to 300 words**. The abstract must be informative and elucidating the background, aims, methods, results & conclusion in a **SINGLE PARA**. **Abbreviations must be mentioned in full**.
 6. **KEYWORDS:** Abstract must be followed by a list of keywords, subject to the maximum of **five**. These should be arranged in alphabetic order separated by commas and full stop at the end. All words of the keywords, including the first one should be in small letters, except special words e.g. name of the Countries, abbreviations etc.
 7. **JEL CODE:** Provide the appropriate Journal of Economic Literature Classification System code (s). JEL codes are available at www.aea-web.org/econlit/jelCodes.php. However, mentioning of JEL Code is not mandatory.
 8. **MANUSCRIPT:** Manuscript must be in **BRITISH ENGLISH** prepared on a standard A4 size **PORTRAIT SETTING PAPER**. **It should be free from any errors i.e. grammatical, spelling or punctuation. It must be thoroughly edited at your end.**
 9. **HEADINGS:** All the headings must be bold-faced, aligned left and fully capitalised. Leave a blank line before each heading.
 10. **SUB-HEADINGS:** All the sub-headings must be bold-faced, aligned left and fully capitalised.
 11. **MAIN TEXT:**

THE MAIN TEXT SHOULD FOLLOW THE FOLLOWING SEQUENCE:**INTRODUCTION****REVIEW OF LITERATURE****NEED/IMPORTANCE OF THE STUDY****STATEMENT OF THE PROBLEM****OBJECTIVES****HYPOTHESIS (ES)****RESEARCH METHODOLOGY****RESULTS & DISCUSSION****FINDINGS****RECOMMENDATIONS/SUGGESTIONS****CONCLUSIONS****LIMITATIONS****SCOPE FOR FURTHER RESEARCH****REFERENCES****APPENDIX/ANNEXURE****The manuscript should preferably be in 2000 to 5000 WORDS, But the limits can vary depending on the nature of the manuscript.**

12. **FIGURES & TABLES:** These should be simple, crystal **CLEAR, centered, separately numbered** & self-explained, and the **titles must be above the table/figure. Sources of data should be mentioned below the table/figure. It should be ensured that the tables/figures are referred to from the main text.**
13. **EQUATIONS/FORMULAE:** These should be consecutively numbered in parenthesis, left aligned with equation/formulae number placed at the right. The equation editor provided with standard versions of Microsoft Word may be utilised. If any other equation editor is utilised, author must confirm that these equations may be viewed and edited in versions of Microsoft Office that does not have the editor.
14. **ACRONYMS:** These should not be used in the abstract. The use of acronyms is elsewhere is acceptable. Acronyms should be defined on its first use in each section e.g. Reserve Bank of India (RBI). Acronyms should be redefined on first use in subsequent sections.
15. **REFERENCES:** The list of all references should be alphabetically arranged. **The author (s) should mention only the actually utilised references in the preparation of manuscript** and they may follow Harvard Style of Referencing. **Also check to ensure that everything that you are including in the reference section is duly cited in the paper.** The author (s) are supposed to follow the references as per the following:
 - All works cited in the text (including sources for tables and figures) should be listed alphabetically.
 - Use (ed.) for one editor, and (ed.s) for multiple editors.
 - When listing two or more works by one author, use --- (20xx), such as after Kohl (1997), use --- (2001), etc., in chronologically ascending order.
 - Indicate (opening and closing) page numbers for articles in journals and for chapters in books.
 - The title of books and journals should be in italic printing. Double quotation marks are used for titles of journal articles, book chapters, dissertations, reports, working papers, unpublished material, etc.
 - For titles in a language other than English, provide an English translation in parenthesis.
 - **Headers, footers, endnotes and footnotes should not be used in the document.** However, **you can mention short notes to elucidate some specific point**, which may be placed in number orders before the references.

PLEASE USE THE FOLLOWING FOR STYLE AND PUNCTUATION IN REFERENCES:

BOOKS

- Bowersox, Donald J., Closs, David J., (1996), "Logistical Management." Tata McGraw, Hill, New Delhi.
- Hunker, H.L. and A.J. Wright (1963), "Factors of Industrial Location in Ohio" Ohio State University, Nigeria.

CONTRIBUTIONS TO BOOKS

- Sharma T., Kwatra, G. (2008) Effectiveness of Social Advertising: A Study of Selected Campaigns, Corporate Social Responsibility, Edited by David Crowther & Nicholas Capaldi, Ashgate Research Companion to Corporate Social Responsibility, Chapter 15, pp 287-303.

JOURNAL AND OTHER ARTICLES

- Schemenner, R.W., Huber, J.C. and Cook, R.L. (1987), "Geographic Differences and the Location of New Manufacturing Facilities," Journal of Urban Economics, Vol. 21, No. 1, pp. 83-104.

CONFERENCE PAPERS

- Garg, Sambhav (2011): "Business Ethics" Paper presented at the Annual International Conference for the All India Management Association, New Delhi, India, 19–23

UNPUBLISHED DISSERTATIONS

- Kumar S. (2011): "Customer Value: A Comparative Study of Rural and Urban Customers," Thesis, Kurukshetra University, Kurukshetra.

ONLINE RESOURCES

- Always indicate the date that the source was accessed, as online resources are frequently updated or removed.

WEBSITES

- Garg, Bhavet (2011): Towards a New Gas Policy, Political Weekly, Viewed on January 01, 2012 <http://epw.in/user/viewabstract.jsp>

PRIORITIZING CRITICAL FACTORS IN DELIVERING QUALITY SERVICES TO PATIENTS

SUGANDHA SIROHI
RESEARCH SCHOLAR
INSTITUTE OF MANAGEMENT STUDIES
DAVV
INDORE

RAJENDRA SINGH
DIRECTOR
SCHOOL OF COMMERCE
DAVV
INDORE

ABSTRACT

Background & objectives: In today's era of competitive healthcare market it has become important to find out the critical factors which are helpful in delivering quality healthcare services to the patients. The hospital management is spending a lot of time and money on finding out ways to provide quality services to their patients and such efforts can be put into right direction and will prove to be more productive only when these critical factors are prioritized and maximum improvements are done on the targeted factors. The study was conducted with an objective of measuring service quality and prioritizing critical factors to deliver quality services to patients in a private hospital of Indore District of Madhya Pradesh. **Methods:** Cross-sectional study was conducted by collecting primary data from 422 IPD patients on the day of discharge using SERVQUAL questionnaire developed by Parasuraman et al. **Results:** As per the results of the present study most of the respondents are satisfied with most of the services of the hospital. Major satisfiers were admission and reception, room preparation at the time of admission, other basic amenities like drinking water availability, ventilation, etc, sign boards placement, behavior of nurses, behaviour of doctors, radiology and pathology, discharge process, nursing services and quality of doctors whereas the major dissatisfiers were cleanliness of the toilet, dietary services, pharmacy, behavior of housekeeping staff. The various critical factors for the study unit are also enlisted priority wise. **Interpretation & Conclusions:** For the present study unit, the study suggests that keeping the factor which requires the maximum improvement to deliver quality services are firstly- cleanliness of the toilet, secondly-dietary services and then pharmacy and behavior of housekeeping staff respectively. Therefore, hospital managers should implement service quality evaluation tools to prioritize critical factors in delivering quality healthcare services to patients.

KEYWORDS

patient satisfaction, service quality, SERVQUAL.

INTRODUCTION

Service quality plays a significant role in service industry especially hospitals because in service industry where tangibility is less the features cannot be defined for patients to directly make an opinion before it has been properly found out. For a hospital to progress and uphold a superior position in the competitive era, it is necessary to assess the performance of the services rendered to the patients. Nowadays, hospital management puts in lots of efforts in the form of time and money in putting together high quality services to satisfy their patients. Satisfied patients in most of the cases are likely to become loyal to the hospital and are expected to recommend the hospital to those who need healthcare services. In hospitals critical factors in delivering quality services can be prioritized by assessing patient's expectations and perceptions of service quality and the level of satisfaction obtained from the services rendered by the hospital. SERVQUAL instrument with five dimensions including Tangibility, Reliability, Responsiveness, Assurance and Empathy will be applied in this study to enable the assessment of patients' expectations and perceptions of the service quality provided by the study unit. This will help us know the extent to which patients are satisfied with the services they get from the hospital. Parasuraman et al., (1988) acknowledged that the difference between customer's expectation and customer perceptions is called the "performance gap". This gap determines the level at which customers are satisfied, that is, this gap serves as a yardstick for management to know their performance and if the services delivered are up to customers' expectations or not and if they are satisfied with the services delivered to them.

REVIEW OF LITERATURE

In today's era when hospital management is spending a lot of time and money on finding out ways to provide quality services to their patients, it has become very important to prioritize factors which when taken care off will raise the level of patient satisfaction. If patient satisfaction is given top priority by healthcare services providers, then the possibility to build efficient bases and minimize cost for petitioning new users since the cost of obtaining new patients surpasses that of upholding existing ones (Barlow and Moller, 1996). This would ultimately help give a proper direction to the management efforts with respect to time and money both. Service quality has become an essential subject in view of its significant relationship to profit, cost saving and market share (Devlin and Dong, 1994). When competition is on an increasing trend, rapid growth and changes in technology in the healthcare market and the fact that patients nowadays possess a certain level of awareness about medical care, healthcare service providers are somehow limited in their ability to improve service quality to mark a hundred percent fulfillment of patient satisfaction (Chahal and Kumari, 2012).

NEED OF THE STUDY

It has become very important to prioritize critical factors in delivering quality services to the patients in order to help give a proper direction to the management efforts with respect to time and money and will eventually help raise the level of patient satisfaction ultimately the more a patient is satisfied the more he/she is expected to recommend the hospital to other patients who need healthcare services.

OBJECTIVE

This study is aimed to use SERVQUAL in healthcare to prioritize critical factors in delivering quality services to patients.

RESEARCH QUESTIONS

As this study is directed to know patient's service quality perception, the following research questions will surely facilitate us know what patients expect and what they experience:

1. Are patients satisfied with the quality of services received from the hospital?
2. What are the factors which require maximum improvement to provide quality services to the patients?

RESEARCH METHODOLOGY

A cross-sectional study was conducted and a pre-structured and pre-tested SERVQUAL questionnaire developed by Parasuraman et al. was got filled from 422 IPD patients of a Private Hospital of Indore district of Madhya Pradesh on the day of their discharge that were selected using Simple Random Sampling depending upon the total average no. of discharges/day. SERVQUAL is designed to measure quality expectations and perceptions about quality of services using 22 items representing five dimensions, using a seven-point Likert scale: 1. Tangibles – physical facilities, equipment and appearance of personnel. 2. Reliability – ability to perform the promised service dependably and accurately. 3. Responsiveness – willingness to help consumers and provide prompt service. 4. Assurance – competence, courtesy and security. 5. Empathy – caring and individualized attention. Consumer ratings across all the 22 items of the survey instrument were collected in paired expectation and perception scores and SPSS software was used for data analysis. Informed consent was taken from the patient before filling the questionnaire. Period of study was April 2015 to June 2015. Including the patients who have used hospital services during the study period and excluding those patients who are working in healthcare facilities and also excluding readmitted patients during the same study period.

RESULTS AND DISCUSSIONS

The study was conducted using SERVQUAL questionnaire and getting it filled by 422 IPD patients and their relatives covering all the wards of the private hospital. Two open ended questions were given for their opinion about the problems and suggestions for improvement of services.

ADMISSION AND RECEPTION

About 16% respondents felt it was excellent, 26% felt it was very good, 40% felt good, 18% felt it was average. None of them said it to be poor. Overall, 82% respondents were satisfied with the services at admission counter. There is a procedure of issuing only two attendant's passes. However, respondents faced problem when attendant is a lady and the attendant has to go out to get anything like medicines, etc.

ROOM PREPARATION AT THE TIME OF ADMISSION

About 18% respondents felt it was excellent, 58% respondents felt very good, 14% felt good, 9% felt it was average. One percent of them said it to be poor. As a whole, 90% respondents were satisfied with the room preparation at the time of admission.

NURSING SERVICES

About 27% respondents felt it was excellent, 46% felt very good, 23% felt good, 3% felt it was average. One percent of them said it to be poor. So on a whole, 96% respondents were satisfied with the nursing services. Respondents were satisfied with the expertise of nursing staff.

QUALITY OF DOCTORS

Nearly 38% respondents felt it was excellent, 40% respondents felt very good, 16% felt good, 3% felt it was average. 3% of them said it to be poor. In total, 94% respondents were satisfied with the explanation about disease and treatment by doctors.

CLEANLINESS OF TOILETS

Nearly 10% of respondents felt it was excellent, 17% respondents felt very good, 42% felt good, 22% felt it was average. About 9% of them said it to be poor. On a whole, only 69% respondents were satisfied with the cleanliness of the toilets. This was the biggest dissatisfier.

BASIC AMENITIES (INCLUDING DRINKING WATER, VENTILATION, ETC)

About 49% respondents felt it was excellent, 40% felt it was very good, 10% felt good, only 1% felt it was average. None of them said it to be poor. So on a whole, 99% respondents were satisfied with the drinking water facility. RO were put at all the floors and the water cooler area was clean.

SIGN BOARDS

Nearly 45% respondents felt it was excellent, 42% respondents felt very good, 10% felt good, 3% felt it was average. None of them said it to be poor. In total, 97% respondents were satisfied with the placement of sign boards in the hospital premises to help and direct the patients at the right place without any trouble.

PHARMACY

About 3% respondents felt it was excellent, 23% respondents felt very good, 50% felt good, 14% felt it was average. About 10% of them said it to be poor. So on a whole, 76% respondents were satisfied with the pharmacy. It was the third major dissatisfier.

DIET SERVICES

About 11% respondents felt it was excellent, 28% respondents felt it was very good, 35% felt good and 12% felt it was average. 14% of them felt it to be poor. In total, only 74% respondents were satisfied with the dietary services. It was the second major dissatisfier.

BEHAVIOR OF NURSES

About 11% of respondents felt it was excellent, 41% respondents felt very good, 42% felt good, 6% felt it was average. None of them said it to be poor. On a whole, 94% respondents were satisfied with the behavior of Nurses.

BEHAVIOUR OF DOCTORS

Nearly 51% respondents felt it was excellent, 30% respondents felt very good, 9% felt it was good. About 6% said it was average. Only 4% said it to be poor. Some respondents felt that the doctors were less sensitive and empathetic to their problems. The new generations of doctors should be trained in soft skills and value of empathic care must be reemphasized. However, 90% respondents were satisfied with the behavior of Doctors.

BEHAVIOR OF HOUSEKEEPING STAFF

About 11% respondents felt it was excellent, 32% respondents felt very good, 35% felt it was good, 9% felt it was average, 13% of them said it to be poor. It was felt that there is less sensitivity about protocols to avoid cross infection. Some respondents complained about the bad behavior of housekeeping staff, although they did not give in writing. The shortage of staff for taking the patient for investigations and physiotherapy was also reported. On a whole, 78% respondents were satisfied with the behavior of housekeeping staff. It was one of the dissatisfier.

RADIOLOGY AND PATHOLOGY

About 11% of respondents felt it was excellent, 42% respondents felt very good, 45% felt good, 2% felt it was average. None of them said it to be poor. On a whole, 98% respondents were satisfied with the radiology and pathology services. Respondents observed that the ward staff on duty received quick reports of all the pathological investigations which in the due course facilitated the timely treatment of the patients. They also had confidence on the accuracy of the investigation results as the laboratory was NABL accredited and hospital had all high end technology radiology machines.

DISCHARGE PROCESS

Nearly 51% respondents felt it was excellent, 30% respondents felt very good, 10% felt it was good. About 5% said it was average. Only 4% said it to be poor. Overall, 91% respondents were satisfied with the discharge process.

RECOMMENDATIONS AND SUGGESTIONS

For the present study unit, the study suggests that keeping the factor which requires the maximum improvement to deliver quality services at the top followed by others as per their priority is as follows:

1. Cleanliness of the toilet
2. Dietary services
3. Pharmacy
4. Behavior of housekeeping staff
5. Admission and reception
6. Room preparation at the time of admission and behaviour of doctors
7. Discharge process
8. Behavior of nurses and quality of doctors
9. Nursing services

10. Sign boards placement
11. Radiology and pathology
12. Other basic amenities (like drinking water facility, ventilation, etc.)

On interaction with the patients and their attendants, following suggestions came out for improvement:

- The policy of issuing two passes may have to be reconsidered.
- The patients and their relatives should be clearly informed in writing about the rules and regulations. This should be available in Hindi also.
- There should be package charges for some procedures to avoid running around by patient's attendant for minor requirements.
- The doctors should be trained and value of empathic care and soft skill must be re-emphasized.
- More number of staff nurses should be posted for patient care.
- Housekeeping staff should be trained about the importance of hand washing and other universal precautions, before and after touching any patient.
- The timing of ward rounds should be fixed so that the patient is mentally prepared for the same and can take rest at other time.
- Toilet cleaning should be done thrice a day and frequent and surprise checks by administrators will instill a sense of responsibility and alertness in housekeeping supervisors.
- Effective measures should be taken for pest control in the hospital.
- More variety of food items should be added in the menu list of the canteen. Also diet charts should be given along with the patient diet and patient's food should be supplied in the ward on time.

CONCLUSION

As per the findings of the present study most of the respondents are satisfied with most of the services of the hospital. Major satisfiers were admission and reception, room preparation at the time of admission, other basic amenities like drinking water availability, ventilation, etc, sign boards placement, behavior of nurses, behaviour of doctors, radiology and pathology, discharge process, nursing services and quality of doctors whereas the major dissatisfiers were cleanliness of the toilet, dietary services, pharmacy, behavior of housekeeping staff.

LIMITATIONS OF THE STUDY

Firstly, the respondents were only inpatients thus views of outpatients could not be covered during the study which in effect may affect the result to some extent. The study was also limited to patients of a private hospital only. As a result, it is therefore suggested that further study be carried out in the public healthcare facilities in order to ascertain a comprehensive understanding of patients' satisfaction in healthcare delivery. Also the sample is drawn from the patients who have used hospital services during the study period and excluding those patients who are working in healthcare facilities and also excluding readmitted patients during the same study period.

ACKNOWLEDGMENT

Thanks are due to the Director of the hospital for providing the opportunity to conduct the study. Special thanks to Parasuraman et al. for developing SERVQUAL questionnaire. We also express our gratitude to the patients for providing their valuable time for interview.

REFERENCES

1. Barlow, J., & Moller, C. (1996), "A complaint is a gift" San Francisco: Berrett-Koehler Publishers.
2. Chahal & Kumari (2012), "Service Quality and Performance in the Public Health-Care Sector", Health Marketing Quarterly, pp.181-205.
3. Devlin, S.I. and Dong, H.K., (1994), "Service Quality from Customers' Perspective", Marketing Research, Vol. 6, No. 1, pp. 5- 13.
4. Parasuraman, A., Zeithaml, V. A., & Berry, L. L. (1988), "SERVQUAL: A multiple-item scale for measuring consumer perceptions of service quality", Journal of Retailing, 64(1), 12-40.

REQUEST FOR FEEDBACK

Dear Readers

At the very outset, International Journal of Research in Commerce & Management (IJRCM) acknowledges & appreciates your efforts in showing interest in our present issue under your kind perusal.

I would like to request you to supply your critical comments and suggestions about the material published in this issue, as well as on the journal as a whole, on our e-mail infoijrcm@gmail.com for further improvements in the interest of research.

If you have any queries, please feel free to contact us on our e-mail infoijrcm@gmail.com.

I am sure that your feedback and deliberations would make future issues better – a result of our joint effort.

Looking forward to an appropriate consideration.

With sincere regards

Thanking you profoundly

Academically yours

Sd/-

Co-ordinator

DISCLAIMER

The information and opinions presented in the Journal reflect the views of the authors and not of the Journal or its Editorial Board or the Publishers/Editors. Publication does not constitute endorsement by the journal. Neither the Journal nor its publishers/Editors/Editorial Board nor anyone else involved in creating, producing or delivering the journal or the materials contained therein, assumes any liability or responsibility for the accuracy, completeness, or usefulness of any information provided in the journal, nor shall they be liable for any direct, indirect, incidental, special, consequential or punitive damages arising out of the use of information/material contained in the journal. The journal, neither its publishers/Editors/ Editorial Board, nor any other party involved in the preparation of material contained in the journal represents or warrants that the information contained herein is in every respect accurate or complete, and they are not responsible for any errors or omissions or for the results obtained from the use of such material. Readers are encouraged to confirm the information contained herein with other sources. The responsibility of the contents and the opinions expressed in this journal are exclusively of the author (s) concerned.

ABOUT THE JOURNAL

In this age of Commerce, Economics, Computer, I.T. & Management and cut throat competition, a group of intellectuals felt the need to have some platform, where young and budding managers and academicians could express their views and discuss the problems among their peers. This journal was conceived with this noble intention in view. This journal has been introduced to give an opportunity for expressing refined and innovative ideas in this field. It is our humble endeavour to provide a springboard to the upcoming specialists and give a chance to know about the latest in the sphere of research and knowledge. We have taken a small step and we hope that with the active co-operation of like-minded scholars, we shall be able to serve the society with our humble efforts.

Our Other Journals

