

Periodic Research

Relationship between Customer Orientation and Nursing and Support Services Dimension of Service Quality in Multispecialty Hospitals



Ajay Kumar Dogra

Research Scholar,
University Business School,
Punjab University,
Chandigarh.

Suresh Kumar Chadha

Professor,
University Business School,
Punjab University,
Chandigarh.

Sanjeev Kumar Sharma

Professor,
UIAMS,
Punjab University,
Chandigarh.

Abstract

It is important to separate and consider both technical and human aspects in order to develop a global view of quality of care. Another aspect is the level of customer expectation in terms of health care responsiveness. Positive health care outcomes, such as life expectancy are growing, which contributes to a constant increase in customers' expectations. Customer orientation helps the hospitals to focus on needs and demands of patients, so it is important for managers to ensure a customer oriented environment at work place. Purpose of the present study is to find out relationship between the customer orientation and service quality dimensions of nursing and supporting services. From the data collected from 10 hospitals and 500 respondents, it was revealed that there is a strong positive correlation between the customer orientation and nursing and supporting services dimensions of service quality.

Keywords: Orientation, Customer, Relationship, Dimensions, Support Services, Nursing Services, Multi Specialty Hospital.

Introduction

Like quality in most services, healthcare quality is difficult to measure owing to inherent intangibility, heterogeneity and inseparability features. Butler et al. (1996) reiterate Zeithaml (1981) that patients participating in production, performance and quality evaluations are affected the current issue. Generally, purchases can be categorized as having search, experiential and credence properties. Specifically, healthcare is by nature a credence purchase. Patients may be unable to assess medical service technical quality accurately; hence, functional quality is usually the primary determinant. Health care quality can be studied at two different levels. At one level, it can be assessed as a performance issue related to the entire health care system. At the organisational level, on the other hand, actors such as patients and doctors involved in service delivery can assess health care quality. It is important to separate and consider both technical and human aspects in order to develop a global view of quality of care. Another aspect is the level of customer expectation in terms of health care responsiveness. Positive health care outcomes, such as life expectancy are growing, which contributes to a constant increase in customers' expectations.

Customer orientation is a vast term, used to cover all the components which contribute to maintaining an efficient relation with clients. The success of all organizations is based on the capacity to manage the clients' expectations, facilitating loyalty and investments (financial and otherwise). "Customer orientation" doesn't mean being only aware of your clients, it also refers to the actions that need to be taken in order to ensure they will continue to be your clients. Customers service is also an essential component of customer orientation and is currently acknowledged as one of the most efficient ways to add value to products and services. In most cases, clients have many available options, so the decisive factor for them to come back or not is the received service. In many industries and sectors this also means is more likely for the customers to buy again from the same company or to come back to it in order to benefit from certain services, which will generate more profit. The client, in service providing organizations, is the reason behind the company.

A number of studies have provided valuable empirical support for a positive quality profitability relationship. Specifically, quality is found to be the most influential determinant of a strategic business unit's performance. For services, Zeithaml et al. (1996) found that service quality has a strong positive effect on respondents' loyalty to the company and a negative effect on propensity to switch. Superior service quality helps to generate greater revenue and yield greater profitability. In short, superior service quality has a positive effect on business profitability. Because both Customer orientation and service quality moderate offerings and have a positive impact on business profitability, a subsequent question is how customer orientation and service quality are related. Conceptually, one immediate effect of the offering modifications is a firm's improved ability to satisfy customers' needs effectively by realizing what they want. Better served customers are likely to make repeat purchases and spread out positive word-of-mouth information to potential new customers. Another direct effect of the offering modifications is the increased capability to serve customers efficiently by eliminating or reducing nonessential services by learning what customers do not need.

Review of Literature

A customer-oriented behavior is the ability of the service provider to help consumers, which leads not only to an increase in customer satisfaction and a positive relationship with employee performance (Heinonen and Strandvik, 2015). but also a level of emotional commitment to the organization of these consumers. Researchers believe that this customer-oriented organizational culture would involve: focusing on and assessing the customer needs through effective market orientation and thereafter making the customer feel good by delivering high-quality services in response to those needs. It is only when the services provided meet the needs of the customer that the customer perceives the quality of service to be high organizational culture of customer care.

Health care systems and hospitals in particular exist as the centre for patient/consumer care delivery and are the organizational hub of a much larger health care provider network. Consequently, hospitals are providers of services, which are intangible, inseparable, variable, and perishable. Moreover, existing consumer marketing research has found that production and consumption of the service occur simultaneously, so strategies that acknowledge the importance of the consumer must be integrated into the hospital health care delivery systems process (Craig et al., 2007).

When gathering the information about these systems, patient/consumer/consumers of health services rely more on personal and intimate sources such as stories and anecdotes because of the very nature of the service (Narayana and Lalitha, 2013). Then, the providers in the choice set are evaluated yet again by the patient/consumer before the latter is able to reach a decision. In particular, consumer marketing studies reveal that the patient/consumer is not alone in the decision execution; there is a decision-making unit that influences this choice. In

fact, in the healthcare industry, research shows that the decision-making unit likely include an initiator (family member), an influencer (physician), a decider (physician, patient/consumer or insurance), a buyer (third party insurance or employer), and the user (patient/consumer). As a final point, additional research has shown that patient/consumer involvement in decision making related to his or her health choices is increasing as patient/consumers are exposed to an increasing number of health care system providers (Porter and Teisberg, 2007).

Health care services are particularly complex in their characteristics, are heterogeneous in their range of medical specialisations and associated services, and ambiguous in the sense that the average customer has no technical knowledge to understand his or her particular needs or the services available to satisfy them (Baker, Davis and Bloom, 2015). Thus, accepting this complexity, heterogeneity and ambiguity, quality should not only be assessed from the customer's point of view, but also from that of the providers.

The whole focus of healthcare industry is patients' well-being (both physical and mental). Patients are usually in a physical or a psychological discomfort when they consume health services. Further, due to high degree of intangibility involved in providing care and high professionalism (e.g. physician specialization, skills, etc.) demanded, healthcare services are difficult to evaluate patients/consumers in healthcare (Buyukozkan, 2011).

Healthcare has numerous consumers: patients, who actually consume the service provided; physicians, who recommend healthcare providers for their patients; third-party payers, who dictate patients' choice of hospitals by their substantial financial influence. Keeping pace with technological advances, there is a fundamental shift in healthcare consumerism – patients are becoming better informed, more involved in their own healthcare and more demanding. It is well established among marketing theorists that firms which focus their activities on the needs of their customers, i.e. behave in a customer-oriented way, perform better than those companies that do not (Donovan et al., 2004). The studies by Jaworski and Kohli (1993) empirically substantiate the economic potential of a firm's customer orientation. At the same time, much less research has looked into the concept of overall firm customer orientation and analyzed what customer orientation means in terms of processes, policies, and employees.

Because of the intangible nature of services and their high level of customer interaction and integration, customer orientation can be expected to play a crucial role in terms of economic success for service companies (Edvardsson and Phillip, 2014).

Several scholars claim that the organizational processes that are associated with a customer orientation are dynamic capabilities that foster innovation and renewal (Blocker, Flint & Slater, 2011). In broad terms, customer-oriented processes of market sensing, customer relating, and

customer-response are aimed at acquiring and transforming customer information into knowledge that can be used so that the firm can respond to customer needs. Approaches to generating novel ideas from customer-based information include interpretation of customer complaints, assessing sources of customer dissatisfaction, identifying and evaluating current and future customer demands (e.g. faster, cheaper, lighter, smaller), and making observations from buyer behaviours (Martin, 2013).

In the context of service quality research, it has been demonstrated that the behavior of service employees affects the customers' perception of the service specifically; researchers have identified employee-related aspects of the service as dimensions of the customer's service quality assessment (Hyatii et.al, 2015). For example, three out of five service quality dimensions of SERVQUAL measure directly or indirectly address the behavior of employees (i.e. responsiveness, assurance, and empathy). Therefore, a service provider gains only limited information on the managerial action that is needed to select and train their service employees. A customer orientation focuses primarily on the realization of the interests and needs of customers and deliver appropriate solutions to their requests (Bellou, 2009).

Statement of the Problem

Service quality in hospitals is an important concept as the patients visiting the hospitals are under physical as well as mental discomfort, along with this they are also concerned about the expenses which will be born directly or indirectly by the patients to avail services, public hospitals generally do not have all the facilities and private hospitals are expensive to be afforded by middle class people. So, whatever is being spent by the patients must provide them the best care and service quality. Along with the service quality orientation of hospitals towards customer is also important and it has a direct impact or correlation with the service quality, more customer oriented hospitals will be providing better quality of services. In this paper an attempt has been made to find out relationship between customer orientation and dimensions of service quality.

Objectives of Study

1. To study the Customer orientation practices being followed in multi speciality hospitals of Chandigarh Tricity.
2. To study nursing services dimension of service quality in selected hospitals
3. To study the support services dimension of service quality in selected hospitals.

4. To find the relationship between customer orientation and selected dimensions of service quality in selected hospitals.

Hypothesis

H1

There is significant relationship between customer orientation and nursing services.

H2

There is a significant relationship between customer orientation and support services.

Research Methodology

Descriptive study design was used for purpose of this study. A sample size of 500 respondents was taken from ten different hospitals. In order to avoid any biasness both public and private hospitals were selected. Five hospitals from each category of hospitals were selected.

Self administered questionnaire was used to record the responses of participants. Secondary data was collected from, research papers, journals, newspapers, websites and magazines. Selected hospitals were from the north part of India, covering states of Punjab, Haryana, Uttar Pradesh and union territories of Chandigarh and New Delhi.

Following were the statements related to Nursing services and Supporting services of service quality.

Nursing Services

NS 1	Nurse was prompt in attending to your need in this hospital
NS2	Nurse administered your prescribed medication on time
NS 3	Nurse was courteous in behaviour in this hospital
NS4	Nurse was helpful according to your personal demands
NS 5	Courtesy and responsiveness shown by the nurses to your visitors was of good quality.

Supporting Services

SS 1	The hospital provides Diagnostics services with less waiting time
SS2	Required Medicines are available in the pharmacy
SS 3	Hospital provided good food (nutritious, hygiene and timelines)
SS4	Housekeeping staff maintains cleanliness in the ward/room
SS 5	Adequacy of hygienic care and procedures (e.g. wearing gloves) followed by the hospital personnel
SS 6	This hospital provides good lab facilities at affordable prices
SS 7	Ambulance and parking facilities are adequate and available all the time
SS 8	Laundry and linen services of the hospital are well maintained.

Data Presentation and Findings

Correlation between Customer Orientation and Nursing Services Dimension of Service Quality

		Customer Orientation	Nursing Services
Customer Orientation	Pearson Correlation	1	.661
	Sig. (2-tailed)		.031
	N	500	500
Nursing services	Pearson Correlation	.661	1
	Sig. (2-tailed)	.031	
	N	500	500

Analysis

Pearson correlation was computed to test the formulated hypothesis. Table 1 shows that the correlation for given scale is significant at 0.031 level of confidence. The result shows that there is strong association between the customer focus and Nursing Services as the beta coefficient is 0.661. Significant

positive correlation reveals that the Customer orientation leads to better Nursing Services in Hospital which affects the good quality of services of Hospital. Thus, the correlation and Regression analysis support the Hypothesis H1. Customers focus positively impacts the Nursing Services in multi specialty hospitals.

Correlation between customer Orientation and Support services of Service Quality

		Customer Orientation	Support services
Customer Orientation	Pearson Correlation	1	.762
	Sig. (2-tailed)		.001
	N	500	500
Support services	Pearson Correlation	.762	1
	Sig. (2-tailed)	.001	
	N	500	500

Analysis

Pearson correlation was computed to test the formulated hypothesis. Table 2 shows that the correlation for given scale is significant at 0.001 level of confidence. The result shows that there is strong association between the customer focus and Infrastructure as the beta coefficient is 0.397. Significant positive correlation reveals that the Customer orientation leads to better Support services in Hospital which affects the good quality of services of Hospital. Thus, the correlation and Regression analysis support the Hypothesis H2. Customers focus positively impacts the Support services in multi specialty hospitals.

Analysis

The responses were collected on a 7 point likert scale, where 1 was strongly disagree and 7 being strongly agree, respondents gave highest preference to the fact that hospital exists mainly for the patients and just profit making is not the purpose of hospital, how much focused the hospital is towards its patients also reflects its customer orientation. If the hospital desires a high degree of patient satisfaction, it is more customers oriented. Apart from this the valuation of patient needs and wants also shows the orientation of hospital towards patients.

Perception of Respondents Regarding Customer Orientation In Hospitals

Conclusion and Suggestions

The analysis of data for the multi speciality hospitals of North part of India suggests that the customer orientation practices adopted by the hospitals have a major impact on the service quality. As far as the nursing services are concerned, nursing staff is the one which interacts with the patients most of the times, so the focus of the hospital must be on being customer oriented and providing best of service quality in terms of nursing services, if customer orientation practices are adopted, it will lead to improvement in service quality dimensions of the hospital. The findings also suggest that improving upon or adopting the customer focused capabilities, which must be based on continuous interaction with patients and their respondents, will lead to more satisfied customer and performance of hospital will also improve. Working on the customer orientation will also help the hospitals to find out the need assessment of the patients. Customer orientation practices also help in improving the supporting services of hospitals which are required for the smooth functioning of hospital services and finally the customer satisfaction. The way nursing staff communicates and behaves with the patients reflects the orientation of hospital towards its customers, and

S.No.	Statements on Customer Orientation	Mean value
1.	The organizational objectives of this hospital are driven mainly by customer satisfaction	4.34
2.	I believe that this hospital exists mainly to serve customers.	5.10
3.	This service hospital measures customer satisfaction frequently in a proper way	3.90
4.	This hospital has routine measures of customer service.	4.20
5.	This hospital's competitive advantage is based on patient needs..	4.10
6.	This hospital is more customer-focused than its competitors	4.50
7.	This hospital regularly monitors level of commitment and orientation towards customer needs	4.20
8.	This hospital asks for feedback from patients at least once to check the quality of its services.	3.90

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overall service quality of hospital depends upon the support services efficiency. Hence, hospital managers and administrators must try to create a work environment where focus is on customer orientation and providing better quality of services, so that patient satisfaction is there.

References

1. Acar,A., Zehir,C. , Ozgenel,N.,(2013),“The Effects of Customer and Entrepreneurial Orientations on Individual Service Performance in Banking Sector”,Vol 99, Elsevier.pg.526-535
2. Alotaibi,M.,(2015),“Evaluation of “AIRQUAL” scale for measuring airline service quality and its effect on customer satisfaction and loyalty”,Cranfield university. Pg. 25-28
3. Baker,S., Bloom,N., Davis,S. (2015), “Measuring economic policy uncertainty”, center for economic performance, ESRC. Pg. 291-96
4. Bellou,V., (2007),“Achieving long-term customer satisfaction through organizational culture: Evidence from the health care sector”, *Managing Service Quality: An International Journal*, emerald. Pg. 510-522
5. Buzzell, R.D., Gale,B.T., (1987), “The PIMS principles “, New York: The Free Press. Pg.233-238
6. Cronin , J.J., Taylor, S.A,(1994).,“SERVPERF versus SERVQUAL: reconciling performance-based and perceptions-minus-expectations measurement of service quality”, *The Journal of Marketing*, pg.76-81
7. Demirkan,H., Delen,D., (2013), “Leveraging the capabilities of service oriented decision support systems: Putting analytics and big data in cloud” *Decision Support Systems*,Elsevier pg.412-421
8. Eiriz,V, Barbosa,N., Figueiredo,J.A..(2010) .“A conceptual framework to analyse hospital competitiveness”,*The Service Industries Journal*, Taylor & Francis. Pg.437-448
9. Girma,M., (2015),“Assessment of inpatients’ satisfaction on quality of care and associated factors at zewditu memorial hospital”. Pg.12-18
10. Green K.W., Cgakrabarty R., Whitten D. (2007) “Organisational culture of customer care: market orientation and service quality” *Int. Journal of Services and standards* Vol. 3 .pg.137-153.
11. Heinonen, K., Strandvik, T.,(2015), “Customer-dominant logic: foundations and implications”, *Journal of Services Marketing*, emerald.pg.472-484.
12. Porter, M., Teisberg, E., (2007), “Changing the Organization of Health Care Reply”, *JAMA*; pg.286-288.
13. Racela,C.O., (2014), “Customer Orientation, Innovation Competencies, and Firm Performance: A Proposed Conceptual Model”,*IJSM*, Vol 148,elsevier.pg.16-23
14. Tong, A., Sainsbury,P., Craig,J., (2007), “Consolidated criteria for reporting qualitative research (COREQ): a 32-item checklist for interviews and focus groups”, *international journal of quality in healthcare, ISQHC*.pg.349-357
15. Zeithaml V.V., Berry L.L., Parasuraman A. (1996). “The behavioural consequences of service quality”,*the Journal of Marketing*, pg.276-287.