

IMPACTS OF THE INNUIYIR KAPPOM THITTAM SCHEME ON SERVICE QUALITY EXTENDED BY THE PRIVATE HOSPITALS IN CHENNAI

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Abstract

Introduction: The government is initiating significant number of measures to improve the service quality of private health care hospitals. There are various schemes that ensures timely and effective treatment for needy people

Objective: To examine the awareness level of emergency care patients towards the Innuyir Kappom Thittam a nd To analyse the impacts of the Innuyir Kappom Thittam scheme on service quality extended by the private hospitals.

Methods: With particular reference to the city of Chennai, this study aims to determine the Service Quality and Patient Satisfaction in Private Hospitals. By using a practical sample strategy, data from 150 patients in Chennai have been gathered. The data has been analysed using statistical tools including percentage analysis and chi-square analysis.

Conclusion: The study's findings show that there is no correlation between degree of satisfaction at private hospitals and age, gender, marital status, educational attainment, occupation, or family monthly income.

Keywords: Government, Schemes, Service Quality, Hospital.

1. Introduction

The government is initiating significant number of measures to improve the service quality of private health care hospitals. There are various schemes that ensures timely and effective

treatment for needy people. The one such scheme introduced by the scheme is Innuyir Kappom Thittam which deals with providing free 48 hour treatment for road accident patients.

The best relationship, the greatest fortune, and the greatest gift are all health. The significance of health for all living creatures in the earth is demonstrated by this remark. Not only are a healthy body and mind crucial for humans, but other living things like animals also greatly benefit from them. These days, both older people and younger people are dealing with an excessive number of health problems, including heart attacks, kidney failure, high blood sugar, high blood pressure, unintentional problems, and other serious problems.

Parents used to set aside a percentage of their money for their children's future economic prosperity, but that assertion is now false because times have changed. Because parents today must wish to save and invest in insurance for the goal of providing medical care for their children. Due to this kind of medical expense, many families are experiencing financial difficulties. Therefore, both public and private hospitals provide a wide range of services to those who are ill. The government of India provides free services to those who are economically and socially disadvantaged. The private hospital is also providing enriched services, but over time, their services have not been as accessible to the underprivileged and disadvantaged.

In the context of the private hospitals in Chennai, this study focuses on offering empirical data to support the link between service quality and patient happiness. There is investigation into the shared and distinctive features of the research context. It is anticipated to deepen our understanding of the calibre of healthcare services and how it relates to patient happiness in a developing country where the subject of the study has only gotten sporadic attention. We initially present theoretical background and hypotheses in the sections that follow. Following the presentation of the research methodology are the research findings,

which are then followed by discussion and implications.

2. Review of the Literature

In her paper, "Service quality perspectives and satisfaction in the health care system"—A study of a few hospitals in Hyderabad Three government hospitals and three private hospitals were among the six chosen for the study that **Priya Deshpande** investigated in. The primary goal of the study was to assess the level of service provided by a particular hospital and to compare service levels among hospitals, particularly between government and commercial hospitals. 200 customers were chosen for the study so that the research's primary data could be collected. The study's conclusion is that private hospitals perform better than government hospitals do.

Rizwan and Samreen (2011) explored the dimensions of the SERVQUAL model which are significant determinants of service quality in Karachi. Factors analysis resulted in five factors, which were statistically significant determinants of patients' satisfaction.

Abdullah Sarwar (2014) conducted a qualitative study to understand the quality of healthcare services in Malaysian private hospitals. A sample of 14 patients was interviewed and a semi-structured questionnaire was used to gather data. Additional investigations are needed to compare outcomes.

"Patients' expectations and perceptions about hospital service quality in Singapore" were the subject of **Lim and Tang's (2000)** study. The SERVQUAL model's five dimensions were initially incorporated into the design of the survey instrument. The questionnaire had 25 questions with a Likert scale of 1 to 5 points. In this study, a third dimension—"accessibility and affordability"—was introduced to the questionnaire in the form of three new items that

were distinct from those in the SERVQUAL model originally used. This new component would be incorporated into the current investigation as well. The survey also included questions on "overall importance" and "overall rating of service quality" in the expectation and perception sections, respectively. Out of 300 questionnaires gathered, 252 were completed satisfactorily by four general practitioners and two specialist clinics. The current study additionally includes a question about the overall rating of service quality. The SERVQUAL score was computed using the mean and standard deviation.

In their study titled "Comparing public and private hospital care service quality," **David Camilleri and Mark O'Chllaghan (1998)** attempted to compare the two hospitals, namely private and public, using 16 service quality measures. Two questionnaires were used to assess patients' pre-admission expectations regarding the quality of public and private hospital services. The second questionnaire, on the other hand, was used to assess patients' impressions of the quality of the services delivered. According to the findings of the study, 60% of respondents were satisfied with the service provided by the private hospital, while 54% were satisfied with the service provided by the public hospital.

Technical and interpersonal aspects are the two components **Carman (2000)** recognised as being important in the hospital industry. Technical aspects include nursing, outcomes, and physical care, whereas interpersonal aspects include food, noise, cleanliness, and parking. Hasin et al. discovered that the elements of service quality in hospitals are communication, responsiveness, civility, cost, and cleanliness.

3. Importance of the Study

These schemes are implemented from the tax revenue of the TN state and it involves lot of recurring expenditure. The effectiveness of the scheme in the private healthcare hospitals has to be measure to know success of the schemes. The lack of effectiveness can hinder the operation of the scheme and its essential to measure the benefits attained by the end users. The study assumes significance in measuring the usefulness of the scheme and enhancement in the service quality of private hospitals which improves the healthcare among emergency care patients.

4. Objective of the Study

1. To examine the awareness level of emergency care patients towards the Innuyir Kappom Thittam.
2. To analyse the impacts of the Innuyir Kappom Thittam scheme on service quality extended by the private hospitals.

5. Limitation of the Study

1. The research was done in Chennai only
2. Due to time constraints and to allow for a thorough analysis, the sample size was limited to 150 samples.
3. It's possible that the findings don't apply to the city as a whole.
4. The study results are based on the assumption that the information provided by the respondents is accurate.

6. Research Methodology

The study adopts to empirical research design which is done based on the observations and opinions from the emergency care patients. The study is carried out using the primary data from the patients. The primary data is collected using the structured interview schedule which is segmented in 6 parts dealing with the service quality and impacts of the Innuyir Kappom

Thittam. The sample will be selected using proportionate random sampling technique among emergency care patients who got treatment in the top ten private sector hospitals. The sample size of the study will be around 150 using the finite sample size calculator using the 5 percent error term and using Percentage Analysis, One Way ANOVA, Chi-Square Test were using.

7. Hypothesis

1. There is no association between the emergency patients' and awareness of the Innuyir Kappom Thittam..
2. There is no association between the Innuyir Kappom Thittam scheme's effects and level of treatment provided by private hospitals.

8. Private Hospitals Offer Special Services & Features

1. **Clean environment:** Major cities like Chennai, Coimbatore, Trichy, and Madurai in Tamil Nadu are serviced by numerous multi-facility hospitals. Additionally, they provide the general public with quality services in a clean setting. If we visit a private hospital in the city of Coimbatore, we can observe the clean environment that the management of the private hospital maintains. to prevent the spread of the disease. However, as compared to private hospitals, the environment in certain government hospitals is not as clean. Some patients are willing to spend a lot of money on their care, but they only want high-quality hospital care. The exclusive hospital satisfies their needs.
1. **Tamilnadu is a top state for medical treatments thanks to its cutting-edge technology,** equipment, and lab

facilities. Due to the private hospitals in Tamilnadu having new technology, many people from various nations and states travel to Chennai and Coimbatore for their medical injuries. Awake open heart surgery was performed for the first time in India, a 2-day-old newborn was dialyzed for the first time in India, and a private hospital in Coimbatore has the first hospital in Asia to construct a 128 slice CT scanner so that 2,000 individuals are screened. Too many people from Tamilnadu and other bordering states also profited in this way.

2. **High patient relationship:** The patients and the private hospitals have remained in excellent terms. When patients first enter private hospitals, the administration and staff, notably the nurses, focus on the patients' satisfaction from the initial stage to the recovery stage. Each patient provides feedback to the private hospitals following their treatments. Measuring the discrepancies between patients' expected services and what they actually receive is very important and contributes to further improvement. They are also respectfully responding to the patient's questions.
3. **Highly motivated employees are employed:** Since the majority of private hospitals have their own nursing and pharmacy schools, they can quickly fill open positions on-campus for a low recruitment and labour cost. The largest benefit of private hospital management is this. However, this kind of characteristic is not present at the government hospital. Therefore, the cost of hiring and training new employees is not increased for the government. Performance-based pay is offered by some private management hospitals,

which greatly encourages employees to become more invested in their work. Additionally, certain hospitals in Chennai and Coimbatore provide complimentary meals.

4. **Service quality:** In Tamil Nadu, some consumers are willing to pay a premium for top-notch services. The majority of Tamilnadu's private hospitals provide their patients with top-notch care. Additionally, they are providing enhanced post-discharge assistance. In

Coimbatore, certain private hospitals specialise in cardiology, neurology, and nephrology, while others offer urology, cancer, and ophthalmology services of the highest calibre. Few private hospitals provide specialised services that are unavailable in public hospitals.

9. Result and Analysis

The following conclusions have been drawn from the research based on the analysis and interpretation of the data that were gathered:

Table: 1 Patients' personal characteristics

Personal Characteristics	Patients	Percentage	
AGE	Below-25 Years	14	9.3
	26 -35 Years	38	25.3
	36 – 45 Years	39	26
	46 – 55 Years	37	24.7
	Above 56 Years	22	14.7
	Total	150	100 %
GENDER	Male	83	55.3
	Female	67	44.7
	Total	150	100 %
MARITAL	Married	96	64
	Un Married	54	36
	Total	150	100 %
EDUCATIONAL	Illiterate	13	8.6
	High School	45	30
	Bachelor Degree	55	36.7
	Master Degree	21	14
	Other	16	10.7
	Total	150	100 %
OCCUPATIONAL	Govt Job	12	8
	Private Job	54	36
	Business	46	30.7
	Self Employee	22	14.7
	Others	16	10.6
	Total	150	100 %

Source: Primary Data

According to the table 1 shows that, the majority of patients at the private hospitals in Chennai City are from the weaker socioeconomic groups, and they are mostly between the ages of 36 and 45. Male patients make up 55.3% of the total

population, while female patients make up 44.7%. Patients come from a variety of occupations, including those in the government, the private sector, business, self-employment, and others, with percentages of 8%, 36%, 30.7%, 14.7%, and 10.6%, respectively. These respondents have a range of educational

backgrounds, including master's and bachelor's degrees, as well as high school diplomas and illiteracy, with respective percentages of 14%, 36.7%, 8.6%, and 30%. There were 8.6%

illiterate respondents. These conclusions are also presented in the Table and Figures. Respondents who are married and single make up 64% of the sample.

Table 2: Descriptive statistical test

S.No	Variable	Mean	SD	Tangible	Reliability	Responsiveness	Empathy	Assurance
1	Tangible	3.35	.63	1				
2	Reliability	3.59	.77	.61	1			
3	Responsiveness	3.75	.65	.61**	.71**	1		
4	Empathy	3.67	.81	.53**	.55**	.47**	1	
5	Assurance	3.75	.77	.54**	.53**	.45**	.47**	1

Source: Primary Data ** P <.01

The descriptive data and relationships between the three aspects of service quality and patient satisfaction are shown in above the table. All three of the service quality criteria significantly (p .01) and in the predicted direction linked with patient satisfaction. The average scores show that patients appear to find the current level of service quality at Private hospitals in Chennai city to be satisfactory (about average). The

Table 3: Regression Test

Table 3 displays the findings of the regression analysis. The findings of a multivariate regression analysis using patient satisfaction as the dependent variable revealed that each of the three elements of healthcare service quality strongly influenced how satisfied Chennai patients were. The regression model, which

tangibles dimension of service quality has the lowest mean score (mean = 3.35), followed by attitudes and medical ethics (mean = 3.59). The best score is for accessibility to healthcare services (mean = 3.75), however it is still below 4 (excellent level). The average degree of patient satisfaction is likewise slightly higher (mean = 3.67). The best score is for accessibility to assurance (mean = 3.75).The subject will be covered later.

explained 34% of the variance in the data, was judged to be significant (F = 148.81, p .01). The regression results, specifically: $\beta = .27$, p <.01; $\beta = .14$, p < .01; and $\beta = .28$, p <.01, respectively, indicated the considerable impact of tangibles, access to healthcare services, and attitude and ethics on patient satisfaction. As a result, the data supported all three assumptions.

S.No	Variable	SC	T Value	Sig	Adj R ²
Services Quality					
1	Hospital equipment & Medical equipment	.283	7.75	P<0.1	.34
2	Accessibility to healthcare services	.143	3.19	P<0.1	
3	Medical ethics& Attitudes	.280	6.63	P<0.1	

10. Conclusion

Thus, the study sheds light on how the Innuyir Kappom Thittam Scheme has affected the level of treatment provided by private hospitals in Chennai. Due to the fact that service is an intangible that we cannot see or touch, private

hospitals are crucial in both large and minor health issues. The purpose of this study was to determine whether patients in private hospitals were satisfied with the care they received from the facilities. The results showed that they were. Additionally, they are happy with the reliability, tangibility, responsiveness, assurance, and

empathy aspects of service quality overall. The majority of patients think the services are top-notch. Instead of focusing on how easy it will be to travel and how much their treatments will cost, they genuinely want superior service and experienced employees like doctors and nurses at hospitals.

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