Impact Of Service Quality On Customer Satisfaction In Private Health Care Industry In Coimbatore -A Study

*Dr K Gunaseelaprabhu, ** S Umamaheswarn,

---

*Associate Professor& Head, Department of management Science, Sri Ramakrishna College of Arts & Science,Coimabtore-641006,Tamil Nadu, India**.**
Part Time Research Scholar, Department of management Science, Sri Ramakrishna College of Arts & Science,Coimabtore-641006,Tamil Nadu, India.**

ABSTRACT

In recent years, service quality has emerged as a critical determinant of customer satisfaction, particularly in the healthcare sector. Private healthcare facilities in Coimbatore, like many across India, face increasing pressure to provide not only effective medical treatments but also exceptional service that meets patients' evolving expectations. Factors such as responsiveness, empathy, reliability, and tangibility play a significant role in shaping patients' perceptions of quality. As patients become more discerning, their expectations for high standards in both treatment and service delivery grow, impacting their overall satisfaction. The study investigates the effect of service quality on customer satisfaction in private healthcare facilities in Coimbatore. Adopting a descriptive research design, the study utilizes a sample of 152 respondents selected through simple random sampling. Data was collected using a structured questionnaire, with primary data focused on key service quality dimensions, including tangibility, reliability, responsiveness, and assurance. Statistical tools such as frequency analysis, descriptive statistics, and one-way ANOVA were employed to analyze the data.The findings reveal moderate levels of customer satisfaction across all service quality dimensions. In terms of tangibility, aspects like the appearance of hospitals received higher satisfaction ratings compared to the professional appearance of employees and the adequacy of physical facilities. The analysis of reliability indicates that while private healthcare facilities generally perform well in clarifying doubts and providing detailed information, there is room for improvement in service accuracy and timeliness. Similarly, responsiveness was rated moderately, with politeness and attentiveness of staff meeting basic patient expectations but requiring further enhancement for better patient experiences.

Keywords: Service Quality, Customer Satisfaction, Reliability, Responsiveness and Private Healthcare Facilities

INTRODUCTION

In recent years, the healthcare industry has experienced a significant transition, with private healthcare institutions increasingly meeting diverse patient demands (Neupane&Devkota, 2017). Coimbatore, renowned for its expanding healthcare infrastructure, reflects this trend, as numerous private providers offer a range of services aimed at fulfilling the healthcare needs of the community. To maintain operational effectiveness, competitive positioning, and patient loyalty, it is essential to understand the factors influencing customer satisfaction at these establishments (Ali & Anwar, 2021).

The study seeks to delve into the complex relationship between service quality and customer satisfaction in Coimbatore's private healthcare facilities, with two main objectives. First, it aims to profile the demographic characteristics of individuals who utilize these services to provide a comprehensive overview of the customer population (Zarei et al., 2014). Second, it intends to assess customer preferences regarding private

healthcare providers in Coimbatore, shedding light on the factors influencing their choice of healthcare facilities (Meesala& Paul, 2018).

The central focus of this inquiry is the evaluation of service quality dimensions—dependability, responsiveness, assurance, empathy, and tangibles—key determinants of customer satisfaction in healthcare (Neupane&Devkota, 2017). By evaluating these dimensions, the study aims to assess the perceived service quality in select private healthcare institutions within Coimbatore. Customer satisfaction, an essential outcome of service quality, not only reflects the adequacy of services but also serves as an indicator of patient experience and loyalty (Ali & Anwar, 2021).

This research seeks to expand current knowledge on service quality and customer satisfaction in private healthcare by systematically examining these objectives. By elucidating these dynamics, the study aims to support strategic decision-making among healthcare providers in Coimbatore's private healthcare sector (Zarei et al., 2014;). Ultimately, the research aspires to elevate service standards and enhance patient satisfaction, thereby fostering lasting patient relationships and loyalty (Meesala& Paul, 2018).

REVIEW OF LITERATURE

Ali and Anwar (2021) investigated how various dimensions of service quality, such as assurance and tangibles, impact customer satisfaction in private hospitals. They found that maintaining a clean and modern facility significantly contributes to patient satisfaction and may even influence their choice of healthcare provider.

Amin and Nasharuddin (2013) studied hospital service quality in relation to patient behavioral intentions, showing that a positive perception of service quality encourages repeat visits and favorable word-of-mouth, thereby impacting the reputation and profitability of private healthcare providers.

Bakan et al. (2014) explored the influence of total quality service (TQS) on patient satisfaction in Turkish private and public hospitals, indicating that private healthcare providers need to manage quality comprehensively to foster a high degree of patient satisfaction and trust.

Meesala and Paul (2018) examined service quality in Indian hospitals and found a direct correlation between service quality dimensions, like assurance and reliability, and patient satisfaction. Their research emphasizes the role of quality standards in determining the satisfaction levels of patients, particularly in private healthcare.

Neupane and Devkota (2017) explored the dimensions of service quality in private hospitals and their effects on patient satisfaction. Their study highlighted that responsiveness, reliability, and empathy are significant predictors of patient satisfaction in healthcare settings, emphasizing that the personal interactions between staff and patients play a critical role.

Nguyen et al. (2021) utilized a mixed-methods approach to investigate the relationship between service quality and patient loyalty. They found that perceived value and service quality are critical factors in ensuring customer loyalty in healthcare settings, suggesting that healthcare providers in Coimbatore should focus on enhancing perceived value to retain patients.

Yesilada and Direktör (2010) conducted a comparative study on the healthcare service quality between public and private hospitals, finding that private facilities often score higher in customer satisfaction due to their emphasis on service quality and a patient-centered approach. This research indicates that private hospitals in regions like Coimbatore could benefit from focusing on these factors to improve patient perceptions.

Zarei et al. (2014) examined patient satisfaction in private hospitals in Tehran, emphasizing that high service quality is directly associated with increased patient satisfaction. Their findings underscore the importance of healthcare facilities investing in continuous service quality improvements to meet patient expectations.

STATEMENT OF PROBLEM

Although private healthcare facilities in Coimbatore have seen substantial expansion and modernisation, there is still a lack of awareness about the impact of service quality on customer satisfaction in this sector. Modern healthcare patients are becoming more discriminating, demanding higher quality treatment and service. Nevertheless, some private healthcare providers have difficulties in continuously providing treatments that meet or beyond customer expectations, which may have an influence on overall satisfaction and loyalty. The issue is exacerbated by the heterogeneous demographic composition of the patient population, which introduces a range of expectations and desires. Although the private healthcare industry has grown, there is no knowledge on the exact elements of service quality that have the greatest impact on patient satisfaction in the Coimbatore area. This research aims to fill this void by investigating the correlation between service quality and customer satisfaction in private healthcare facilities. The objective is to provide valuable insights that may assist healthcare practitioners in optimising service delivery and improving patient outcomes.

OBJECTIVES OF THE STUDY

1. To study the service quality dimensions in current scenario in private healthcare facility in Coimbatore.
2. To analyze the customer satisfaction in private healthcare industry in Coimbatore.
3. To study the impact of SQM and components of quality in private healthcare industry in Coimbatore.

4. To examine the challenges, risks and rewards of creating a holistic, end-to-end approaches to service quality management.
5. To suggest the effective service quality dimensions for healthcare industry in Coimbatore.

SCOPE OF THE STUDY

- The research is conducted in private healthcare institutions operating only within the Coimbatore area. It will provide a localised examination of service quality and customer satisfaction within this unique metropolitan setting.
- The research will include a wide variety of healthcare patients, including various parameters such as age, gender, income level, and education, in order to ascertain the impact of these variables on preferences and levels of satisfaction.
- The study will examine the primary characteristics of service quality in private healthcare settings, including dependability, responsiveness, assurance, empathy, and tangibles. It will investigate how these factors influence total customer satisfaction.
- The research aims to evaluate customer satisfaction levels among patients who have visited certain private healthcare facilities. It will analyse the impact of various service quality elements on their overall satisfaction and the chance of their returning.
- The results will give practical and useful insights for healthcare practitioners. These insights will help them identify and address any shortcomings in their service delivery. Additionally, suggestions will be provided to improve patient care and satisfaction. Implementing these recommendations may result in enhanced service strategies and increased customer loyalty.

RESEARCH METHODOLOGY

Research Design

The study adopts a descriptive research design to investigate the effect of service quality on customer satisfaction in private healthcare facilities in Coimbatore. Descriptive research is deemed suitable for the study as it aims to systematically describe the characteristics of the sample population, including their demographic profile, preferences, perceived service quality, and satisfaction levels.

Sample Size

A total sample of 152 respondents has been selected for the study. The sample size was determined based on available resources and the need for a representative cross-section of the population accessing private healthcare facilities in the Coimbatore region.

Sampling Design

The study employs a simple random sampling technique. This method ensures that each member of the target population has an equal chance of being included in the sample, thereby reducing sampling bias and ensuring that the results are reflective of the broader population.

Data Sources

Both primary and secondary data sources are utilized in this research. Primary data is collected directly from respondents through structured questionnaires designed to capture their demographic details, healthcare preferences, perceptions of service quality, and satisfaction levels. Secondary data is obtained from relevant literature, including published reports, journals, and articles, which provide contextual background and support the interpretation of the findings.

Tools Used for Data Collection and Analysis

To analyze the collected data, various statistical tools and techniques are employed. Frequency analysis and descriptive statistics are used to summarize and describe the basic features of the data, providing insights into the distribution of responses across different variables. Additionally, one-way ANOVA is used to test for statistically significant differences in customer satisfaction across various demographic groups and to explore the impact of different service quality dimensions. Multiple regression was used to analyse the impact of SQM and components of quality in private healthcare industry.

ANALYSIS AND INTERPRETATION

Table 1: Demographic variables of the respondents

Demographic variables	Particulars	Frequency	Percent
Gender	Male	43	28.3
	Female	109	71.7
	Total	152	100
Marital status	Married	84	55.3
	Unmarried	68	44.7

	Total	152	100
Age	20-30 years	76	50
	30-40 years	47	30.9
	40-50 years	28	18.4
	Above 50 years	1	0.7
	Total	152	100
Educational qualification	Undergraduate	100	65.8
	Postgraduate	52	34.2
	Total	152	100
Occupation	Government service	23	15.1
	Private Sectored	51	33.6
	Self- employee	45	29.6
	Business	33	21.7
	Total	152	100
Type of family	Joint family	87	57.2
	Nuclear family	65	42.8
	Total	152	100
Monthly family income	Less than Rs.20, 000	20	13.2
	Rs. 20,000 -Rs.30,000	32	21.1
	Rs.30,000 -Rs.40,000	51	33.6
	Above Rs.40,000	49	32.2
	Total	152	100

The study reveals that the majority of respondents in Coimbatore are female, accounting for 71.7% of the total sample, while males make up 28.3%. The majority of respondents are married, with 55.3% being married and 44.7% unmarried. The largest age group is between 20 and 30 years, with 50.9% of the sample aged between 40 and 50 years. The majority of respondents hold an undergraduate degree, with 34.2% having completed postgraduate education. The largest occupational group is 33.6% working in the private sector, followed by self-employed individuals, businesspersons, and government service employees. Joint families make up 57.2% of the sample, while nuclear families account for 42.8%. The majority of respondents come from joint family setups, which may influence their healthcare preferences and decision-making processes. A large proportion of respondents report a monthly family income between Rs. 30,000 and Rs. 40,000, with 32.2% earning above Rs. 40,000. A smaller percentage, 21.1%, have a family income between Rs. 20,000 and Rs. 30,000, and 13.2% earn less than Rs. 20,000. This distribution indicates that the majority of respondents are from middle-to-upper-income households, which may influence their access to and expectations from private healthcare services.

Table 2: Perception of respondents towards private health care facilities based on tangibility

	N	Mean	SD
Appearance of the hospitals	152	2.43	.882
Physical facilities with the hospitals	152	2.12	.788
Professional appearance of the employees	152	1.94	.922
Availability of service	152	2.16	.849

The respondents said as excellent for professional appearance of the employeeswith the hospitals (1.94). Meanwhile, the respondents said as very good for appearance of the hospitals (2.43), physical facilities with the hospitals (2.12) and availability of service (2.16).

Table 3: Comparison between demographic variables (gender, marital status) and Service quality towards private health care facilitiesbased on Tangibility

Ho1: There is no relationship between demographic variables (gender, marital status) and service quality towards private health care facilities based on Tangibility

Demographic variables	Particulars	N	Mean Rank	Chi-Square	Asymp. Sig.
Gender	Male	43	68.30		
	Female	109	79.73	2.138	0.144
	Total	152			
Marital Status	Married	84	74.86		
	Unmarried	68	78.53	0.269	0.604
	Total	152			

There is no relationship between gender (0.144), marital status (0.604) and service quality towards private health care facilities based on tangibility.

Table 4: Comparison between demographic variables (age, monthly family income, and occupation) and Service quality towards private health care facilities based on tangibility

Ho2: There is a significant difference between demographic variables (age, monthly family income, occupation) and service quality towards private health care facilities based on tangibility

Demographic variables	Particulars	N	Mean	SD	F	Sig
Age	20-30 years	76	2.18	0.667		
	30-40 years	47	2.14	0.661		
	40-50 years	28	2.17	0.462	0.067	0.977
	Above 50 years	1	2.00	0.000		
	Total	152	2.16	0.626		
Monthly family income	Less than Rs.20, 000	20	1.95	0.616		
	Rs. 20,000 -Rs.30,000	32	2.02	0.610		
	Rs.30,000 -Rs.40,000	51	2.31	0.628	2.320	0.078
	Above Rs.40,000	49	2.19	0.615		
	Total	152	2.16	0.626		
Occupation	Government service	23	2.18	0.658		
	Private Sectored	51	2.15	0.718		
	Self- employee	45	2.10	0.575	0.459	0.711
	Business	33	2.27	0.526		
	Total	152	2.16	0.626		

There is a significant difference between age (0.977), Monthly family income (0.078), and occupation (0.711)and service quality towards private health care facilities based on Tangibility.

Table 5: Perception of respondents towards private health care facilities based on reliability

Particulars	N	Mean	SD
Clarifying doubts	152	2.38	.853
Time availability to give detailed information	152	2.17	.735
Time taken to deliver the service	152	2.13	.894
Ability to perform service dependently and accurately	152	2.26	.917
Proper information about the services rendered	152	2.28	.864

The respondents said as very good towards clarifying doubts(2.8), time availability to give detailed information(2.17), time taken to deliver the service(2.13), ability to perform service dependently and accurately (2.26) and proper information about the services rendered (2.28).

Table 6: Comparison between demographic variables (gender, marital status) and service quality towards private health care facilitiesbased on reliability

Ho3: There is no relationship between demographic variables (gender, marital status) and service quality towards private health care facilities based on reliability

Demographic variables	Particulars	N	Mean Rank	Chi-Square	Asymp. Sig.
Gender	Male	43	76.63	0.001	0.982
	Female	109	76.45		
	Total	152			
Marital Status	Married	84	74.35	0.456	0.499
	Unmarried	68	79.15		
	Total	152			

There is no relationship between gender (0.982), marital status (0.499) and service quality towards private health care facilities based on reliability.

Table 7: Comparison between demographic variables (age, monthly family income, and occupation) and service quality towards private health care facilities based on reliability

Ho4: There is a significant difference between demographic variables (Age, monthly family income, occupation) and Service quality towards private health care facilities based on reliability

Demographic variables	Particulars	N	Mean	SD	F	Sig
Age	20-30 years	76	2.27	0.640	0.718	0.543
	30-40 years	47	2.29	0.660		
	40-50 years	28	2.09	0.355		
	Above 50 years	1	2.20	0.000		
	Total	152	2.24	0.603		
Monthly family income	Less than Rs.20, 000	20	2.07	0.532	3.194	0.025
	Rs. 20,000 -Rs.30,000	32	2.46	0.627		
	Rs.30,000 -Rs.40,000	51	2.31	0.580		
	Above Rs.40,000	49	2.10	0.599		
	Total	152	2.24	0.603		
Occupation	Government service	23	2.36	0.588	0.358	0.784
	Private Sectored	51	2.25	0.641		
	Self- employee	45	2.20	0.624		
	Business	33	2.21	0.538		
	Total	152	2.24	0.603		

There is a significant difference between age (0.543), and occupation (0.784) and service quality towards private health care facilities based on reliability. There is no significant difference between monthly family income (0.025) and service quality towards private health care facilities based on reliability.

Monthly family income

The respondents who are earning less than Rs.20, 000 (2.07), earning between Rs. 20,000 -Rs.30,000 (2.46), earning between Rs.30,000 -Rs.40,000 (2.31), and earning more than Rs.40, 000 (2.10) said as very good towards service quality towards private health care facilities based on reliability.

Table 8: Perception of respondents towards private health care facilities based on responsiveness

	N	Mean	SD
Politeness	152	2.18	.892
Willingness to help and respond to patients need /requirements	152	2.05	.766
Immediate attention by the service person	152	2.03	.872
Attentiveness in listening your queries	152	2.03	.809
Advice given regarding the necessary service	152	2.10	.828
Promptness in delivery after service	152	2.10	.836

The respondents said as very good towards politenessof staffs (2.18), willingness to help and respond to patients need /requirements (2.05), immediate attention by the service personand attentiveness in listening your queries (2.03),advice given regarding the necessary serviceandpromptness in delivery after service(2.10)

Table 9: Perception of respondents towards private health care facilities based on assurance

Particulars	N	Mean	SD
Ability of staffs to inspire confidence and trust	152	2.36	.857
Inspecting the service	152	2.09	.763
Technical knowledge of service persons	152	2.06	.863
Usage of Modern technology in servicing	152	2.13	.835
Hospitality	152	2.29	.835
Valid N (listwise)	152		

The respondents said as excellent towards ability of staffs to inspire confidence and trust(2.36),inspecting the service(2.09),technical knowledge of service persons(2.06), usage of modern technology in servicing(2.13), and hospitality (2.29).

Table 10: Perception of respondents towards private health care facilities based on empathy

Particulars	N	Mean	SD
Providing prior information about the service changes	152	2.16	.917
Explanation of the service provided	152	2.10	.795
Reminder for renewal of service	152	1.97	.841
Extent to which caring individualized service is given	152	2.06	.840

The respondents said as excellent towards reminder for renewal of service (1.97). The respondents said as very good for providing prior information about the service changes (2.16),explanation of the service provided (2.10), and extent to which caring individualized service is given (2.06).

SATISFACTION OF RESPONDENTS TOWARDS PRIVATE HEALTH CARE FACILITIES

Table 11: Satisfaction of respondents towards private health care facilities

	N	Minimum	Maximum	Mean	SD
Range of service	152	1	4	2.07	.798
Quality of the service	152	1	4	1.99	.789
Availability of fresh items	152	1	4	1.88	.816
Reasonable price	152	1	4	1.91	.766
Accurate weight/Adequate quantity	152	1	4	2.01	.732
Offers and discounts	152	1	4	1.91	.772
Customer services	152	1	4	1.93	.743
Parking facilities	152	1	4	1.96	.708
Valid N (listwise)	152				

The respondents are highly satisfied towards quality of the service(1.99), availability of fresh items (1.88),reasonable price and offers and discounts (1.91), customer services (1.93), parking facilities (1.96). Meanwhile, the respondents are satisfied towards range of service (2.07), accurate weight/adequate quantity (2.01).

Table 12: Comparison between demographic variables (gender, marital status) and Satisfaction of respondents towards private health care facilities

Ho5: There is no relationship between demographic variables (gender, marital status) and satisfaction of respondents towards private health care facilities

Demographic variables	Particulars	N	Mean Rank	Chi-Square	Asymp. Sig.
Gender	Male	43	78.92	0.183	0.668
	Female	109	75.55		
	Total	152			
Marital Status	Married	84	79.39	0.822	0.365
	Unmarried	68	72.93		
	Total	152			

There is no relationship between gender (0.668), marital status (0.365) and satisfaction of respondents towards private health care facilities.

Table 13: Impact of SQM and components of quality in private healthcare industry

Variable	Coefficient	Std. Error	t-value	P-value
Constant	-0.3787	0.444	-0.853	0.395
Tangibles	1.4366	0.063	22.933	0.000
Reliability	2.0426	0.064	32.154	0.000
Responsiveness	1.0983	0.062	17.842	0.000
Assurance	1.5399	0.06	25.58	0.000
Empathy	0.5406	0.06	9.043	0.000

Constant: The intercept is not significant (p = 0.395), suggesting that the model may not provide a meaningful prediction for customer satisfaction when all independent variables are zero.

Tangibles: A coefficient of 1.4366 means that for every one-point increase in the tangibles score, customer satisfaction increases by approximately 1.44 points. This effect is statistically significant (p < 0.001).

Reliability: This has the highest coefficient (2.0426), indicating that improvements in reliability significantly boost customer satisfaction by about 2.04 points per one-point increase in reliability. This is also highly significant (p < 0.001).

Responsiveness: A coefficient of 1.0983 shows a significant positive relationship, with a one-point increase in responsiveness leading to a 1.10-point increase in satisfaction (p < 0.001).

Assurance: Similar to reliability, assurance significantly impacts satisfaction, contributing about 1.54 points for each point increase in assurance (p < 0.001).

Empathy: Although it has the lowest coefficient (0.5406), it still shows a significant positive impact on customer satisfaction (p < 0.001), indicating a 0.54-point increase per one-point increase in empathy.

FINDINGS
- The overall perception of tangibility, which includes the appearance of hospitals, physical facilities, and the professional appearance of employees, reveals moderate satisfaction among respondents. The mean values range from 1.94 to 2.43, indicating that while some aspects like the appearance of hospitals are rated higher, areas like the professional appearance of employees and physical facilities show room for improvement.
- The perception of reliability, which covers aspects such as clarifying doubts, time availability, and service dependability, shows that respondents have moderately positive views, with mean values ranging from 2.13 to 2.38. The results suggest that private healthcare facilities are somewhat effective in providing reliable services, although there is a need for enhancing accuracy and timeliness in service delivery.
- The responsiveness of staff, including politeness, attentiveness, and willingness to help, also demonstrates moderate satisfaction. Mean scores vary from 2.03 to 2.18, indicating that while staff generally meet patient expectations in responsiveness, there is potential for further improvement in delivering prompt and attentive services.
- In terms of assurance, which includes the ability of staff to inspire confidence and their technical knowledge, mean scores range from 2.06 to 2.36. This suggests that while patients trust the competency of healthcare professionals to a certain extent, there is a need for better communication and increased usage of modern technology to strengthen this trust.
- When analyzing overall satisfaction with the services provided by private healthcare facilities, respondents reported moderate satisfaction levels across various aspects such as the range and quality of services, pricing, and customer services. Mean values are generally below 2.10, indicating that while the facilities are meeting basic expectations, there is significant room for enhancing service quality, pricing strategies, and customer support to improve overall satisfaction.
- All components of service quality (Tangibles, Reliability, Responsiveness, Assurance, and Empathy) have a statistically significant positive impact on customer satisfaction in private healthcare facilities in Coimbatore. Reliability and Assurance have the strongest influence, suggesting that these areas may be crucial for enhancing customer satisfaction.

SUGGESTIONS
- To increase the sales of private health care facilities more advertisement can be given targeting unmarried persons who are from the age group of 40-50 as they are have the more frequency of purchase with private health care facilities in Coimbatore.
- To increase the frequency of visiting the hospitals more offers can be given by the departmental hospitals as the visiting frequency is less as per the survey.
- Consider investing in facility upgrades to improve the visual appeal, including decor, cleanliness, and modern infrastructure. Emphasize creating a welcoming and comfortable environment.

- Improve service accuracy and reduce waiting times by implementing efficient appointment scheduling systems and ensuring adequate staffing. Digital queue management systems can help streamline patient flow and reduce wait times.
- Offer regular training to healthcare professionals to stay updated on modern techniques and technology. This will help implant confidence in patients regarding the competency of healthcare providers.
- Introduce counseling or mental health support services as needed, as emotional support is an essential part of healthcare, particularly for patients undergoing stressful treatments.

CONCLUSION

This study on the effect of service quality on customer satisfaction in private healthcare facilities in Coimbatore underscores the multifaceted nature of patient expectations and satisfaction in the healthcare context. The findings reveal that while private healthcare facilities are fulfilling basic expectations, they are yet to achieve high levels of satisfaction in key service quality dimensions such as tangibility, reliability, responsiveness, and assurance. Each dimension demonstrates a moderate level of satisfaction, indicating that although facilities are maintaining a baseline standard, there remains substantial scope for enhancement to meet and exceed patient expectations.In conclusion, the study highlights that private healthcare facilities in Coimbatore are performing at a moderate level in terms of service quality and customer satisfaction. However, there are clear areas that require attention, particularly in improving the physical and professional aspects of service delivery, enhancing reliability and responsiveness, and building stronger assurance through better communication and technology use. By addressing these gaps, healthcare providers can work towards increasing patient satisfaction and loyalty in the long term.

REFERENCES

- Agyapong, A., Afi, J. D., &Kwateng, K. O. (2018). Examining the effect of perceived service quality of health care delivery in Ghana on behavioural intentions of patients: The mediating role of customer satisfaction. *International Journal of Healthcare Management*, *11*(4), 276-288.
- Ahmed, R., Ahmad, N., Nasir, F., &Khoso, I. (2014). Patients' satisfaction and quality health services: an investigation from private hospitals of Karachi, Pakistan. *Research Journal of Recent Sciences, ISSN*, 2277-2502.
- Ali, B. J., & Anwar, G. (2021). Private hospitals' service quality dimensions: The impact of service quality dimensions on patients' satisfaction. *International Journal of Medical and Pharmaceutical Drug Research*.
- Aliman, N. K., & Mohamad, W. N. (2016). Linking service quality, patients' satisfaction and behavioral intentions: an investigation on private healthcare in Malaysia. *Procedia-social and behavioral sciences*, *224*, 141-148.
- Amin, M., &Nasharuddin, S. Z. (2013). Hospital service quality and its effects on patient satisfaction and behavioural intention. *Clinical Governance: An International Journal*.
- Bakan, I., Buyukbese, T., &Ersahan, B. (2014). The impact of total quality service on healthcare and patient satisfaction. *International Journal of Health Planning and Management*.
- Efuteba, C. (2013). *Factors influencing customer satisfaction in health care services: the case of public and private hospitals in North Cyprus* (Doctoral dissertation, Eastern Mediterranean University (EMU)-DoğuAkdenizÜniversitesi (DAÜ)).
- Fatima, T., Malik, S. A., &Shabbir, A. (2018). Hospital healthcare service quality, patient satisfaction and loyalty: An investigation in context of private healthcare systems. *International journal of quality & Reliability Management*, *35*(6), 1195-1214.
- Haque, A., Sarwar, A. A. M., Yasmin, F., & Anwar, A. (2012). The impact of customer perceived service quality on customer satisfaction for private health centre in Malaysia: a structural equation modeling approach. *Information Management and Business Review*, *4*(5), 257.
- Kwateng, K. O., Lumor, R., &Acheampong, F. O. (2019). Service quality in public and private hospitals: A comparative study on patient satisfaction. *International journal of healthcare management*.
- Marković, S., Lončarić, D., &Lončarić, D. (2014). Service quality and customer satisfaction in the health care industry-towards health tourism market. *Tourism and hospitality management*, *20*(2), 155-170.
- Meesala, A., & Paul, J. (2018). Service quality, consumer satisfaction and loyalty in hospitals. *Journal of Retailing and Consumer Services*.
- Muhammad Butt, M., & Cyril de Run, E. (2010). Private healthcare quality: applying a SERVQUAL model. *International journal of health care quality assurance*, *23*(7), 658-673.
- Neupane, R., &Devkota, M. (2017). Evaluation of the impacts of service quality dimensions on patient/customer satisfaction: A study of private hospitals. International *Journal of Social Sciences*.

- Nguyen, N. X., Tran, K., & Nguyen, T. A. (2021). Impact of service quality on in-patients' satisfaction, perceived value, and customer loyalty. *Patient Preference and Adherence*.
- Potluri, R. M., &Angiating, G. (2018). A study on service quality and customer satisfaction in Nigerian healthcare sector. *The Journal of Industrial Distribution & Business*, *9*(12), 7-14.
- Senić, V., &Marinković, V. (2013). Patient care, satisfaction and service quality in health care. *International journal of consumer studies*, *37*(3), 312-319.
- Yesilada, F., &Direktör, E. (2010). Health care service quality: A comparison of public and private hospitals. *African Journal of Business Management*.
- Zarei, E., Daneshkohan, A., Pouragha, B., Marzban, S., & Arab, M. (2015). An empirical study of the impact of service quality on patient satisfaction in private hospitals, Iran. *Global journal of health science*, *7*(1), 1.
- Zarei, E., Daneshkohan, A., Pouragha, B., Marzban, S., & Arab, M. (2014). An empirical study of the impact of service quality on patient satisfaction in private hospitals, Iran. Global Journal of Health Science.