



CONSUMER PERCEPTION OF HOSPITALITY SERVICES IN JCI ACCREDITED HOSPITALS AT DELHI – NCR: AN EXPLORATORY RESEARCH ON GROWTH OF MEDICAL TOURISM

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Abstract

Purpose: This research focuses on understanding the consumer perception and scope of hospitality services provided to patients and their attendants, getting admitted for treatment at internationally accredited multispecialty hospitals. The study also gives insights into the relation among these service elements and their role in the overall satisfaction of patients coming to Delhi NCR as a medical tourist.

Methodology: Literature review and interviews with hospital staff, involved as service providers, to find the hospitality services and facilities provided to patients coming to Delhi NCR as a medical tourist. The study adopted survey through questionnaire method to collect primary data, which is analysed through SPSS to study the perceptions of patients/attendants and its relationship with overall patient satisfaction.

Main Findings: This research finds that the majority of the JCI accredited hospitals in Delhi-NCR, show fairly good focus on patient care and hospitality centric service style was in place. Hospitality aspects are considered as an opportunity to enhance service excellence and the same is supported by management to bring better patient satisfaction. However, the research found some neglected desires of patients and few areas of poor service delivery.

Applications: Hospitals benefiting with medical tourism where attention to nonclinical services is magnified due to a higher expectation of the guest, will benefit from this research. This research would be valuable to healthcare organizations in doing their best to achieve greater patient's satisfaction, which will improve our image as a destination for Medical Value Travel.

Novelty/Originality: This study explores hospitality services and their relative importance in patient satisfaction. This study describes higher patient satisfaction as an outcome of excellence in non-clinical services. The research outcome is based on primary data and offers a first-hand view of patients perceived hospitality service quality and its constituents.

Keywords: *Patient Satisfaction, Consumer Perception, Hospitality Service Medical Tourism, Internationally accredited multispecialty hospitals*

INTRODUCTION

Private Multispecialty Hospitals, which are aiming to tap the opportunity of medical tourism, now cannot afford to be purely medically focused anymore. The hospital design emphasis is quickly shifting to star hotels type amenities & patient services and care which is more hospitality oriented and family-centred. As the hospitals compete for better patient satisfaction and loyalty they realize that high patient satisfaction is no longer just a "good to have" for hospitals. (Wu, Robson, & Hollis, 2013).

Time and again it is observed that hospitals derive their service standards benchmarking and inspirations from star hotels. Service Innovations and practices from hotels are always incorporated in hospitals. This practice is not surprising, knowing that both carry the ultimate objective of reaching high customer satisfaction. Services of all types combine several elements—primarily people, processes, and place-related items—to affect positive outcomes. Increasingly, research evidence suggests the value of enhancing the physical environment to foster healing and drive consumer decisions and perceptions of service quality. (Wu, Robson, & Hollis, 2013)

Though the healthcare service providers adopt broader applicability of various tangible service concepts into the healthcare practices, the focus of this research is on hospitality practices, concepts and design elements, and the services that such innovations support, from the hospitality industry.

Customer satisfaction is crucial to healthcare services also since it represents how far the delivered care and services meet the subjective & objective needs and requirements of the patient.

India is now recognized as a fast emerging medical tourism destination, attracting medical tourism due to the cost advantage derived from an available large pool of well-trained medical professionals at a low cost. Many private hospitals have an excellent reputation for creating a world-class integrated healthcare delivery system that is known to provide the finest medical skills and compassionate patient care. (Sadia, 2008)

At Delhi NCR, many corporate hospitals are established with distinguishing feature of patient centricity in hospitals design, services, program and excellent caring approach of people. Private hospitals are focusing on quality comparable to the world's leading hospitals. Because of the ever-stronger emphasis on cost containment, changing consumer attitudes, and stiff competition, many of the successful hospitals of the next decade will position themselves as "high-quality" health care providers. ([FICCI & Quintiles IMS, 2016](#))

To survive, even those hospitals that do not seek a high-quality brand position will find it necessary to define, monitor, and improve the quality of the services they provide. Technical quality alone, however, will not lead to increased revenues and facility utilization but the hospital needs to provide patient's satisfaction to compete in the industry.

OBJECTIVES

Though overall patient satisfaction is important in the health care service industry; there are very few original studies that attempted to understand the patient's acceptance of the hospitality services in hospitals. With this motivation and given the rapid growth in medical tourism and the increasing number of JCI accredited hospitals in Delhi NCR, this study targets to study non-clinical aspects of service quality in hospitals.

1. To study the present state and scope of hospitality services in hospitals, at Delhi NCR.
2. To explore the patient's perception of hospitality services in JCI accredited hospitals.

LITERATURE REVIEW

Medical Tourism

A steady upward movement in the number of patients visiting India for medical and wellness solutions is because India boasting not only top quality medical professionals but also state of the art facilities at a reasonable cost in comparison to several other countries. ([Rukmini Shrinivasan, 2018](#))

[Ponam Gupta et al.](#), found in their study in 2012 that Delhi appears among the first five most popular destinations for medical tourism in India and Medical Tourism in Delhi is going to blossom. Various kinds of medical facilities are easily and economically available to inbound patients. However, a few problems & challenges faced by the patients need to be addressed. There is still a lot of untapped potential in the field of medical tourism. She concluded that "A customer-oriented approach is required to make inbound patients believed that India is "Your Passport to Healthy Sojourn"." ([Punam, Bhawna, & al, Vol 1, Issue 2, 2012](#))

Dr. Manjula Chaudhary, in her study - published in IMED in 2014, found that in spite of corporates investing a lot of money to make world-class hospitals in India, we are not able to attract patients from developed countries. The main reasons as perceived by the service providers for the growth of medical tourism are - Low cost, less waiting time, Quality and Availability of treatment. For the quality of the treatment, non-clinical and clinical aspects together make for treatment. All medical travel providers feel that patients value both for the decision about the place of treatment. ([Chaudhary & Agrawal, 2014](#))

Patient Satisfaction

While the medical travel and place of treatment decisions are still significantly influenced by physician recommendations and other medical factors, patients' and their families' expectations for the hospitality environment at hospitals have reached levels similar to those at star hotels.

Patient satisfaction is understood as essentially a judgment levied by the patient after the service has been procured and consumed. It is a customer's 'fulfillment' response. These responses may include over-fulfilment or under-fulfilment ([Oliver, 1997](#)). Boshoff and Grey have established in their research that customer satisfaction is just not inherent in the service, but it is a joint venture or the conjugative effect of the service and the customers' perception of the attributes associated with that service. ([Boshoff & Grey, 2004, Vol. 35, No. 4](#)) Therefore, it is quite an essential and elementary for marketers to understand that different customers may exhibit and is right in expressing different levels of customer satisfaction based on their predispositions, attitudes, and perceptions of the service and the attributes related to the service ([Ueltschy, Laroche, Eggert, & al., 2007, Vol. 21, No. 6](#))

Customer satisfaction leads to several benefits such as income, reduction of the cost related to acquiring new customers, customer retention and increased market share. ([Jones & Sasser, 1995](#))([Rust & Keiningham, 1995](#))([Heskett, Jones, Loveman, Jr, & Schlesinger, 1994](#))

Better customer satisfaction can help hospitals in cost reduction through fewer complaints. Also, "*patient satisfaction is a dominant concern that is intertwined with strategic decisions in the health services*" ([Gilbert, Lumpkin, & al., 1992](#))([Andaleeb, 2001](#))([Pakdil & Harwood, 2005](#))

Connor and Trinh found that Consumer's satisfaction, choice of a service provider and service quality evaluation is influenced by the expectations of the consumer (O'Connor, Trinh, & al, 2000). Some patients also have certain expectations about the service they demand before their visit to the hospital or clinic, yet, 18-42% of the time health service provider fails to recognize or address these expectations (Jackson & J Chamberlin, 2001).

A scoping review published in BMC Health Services Research 2010, found that despite engagement with the issue of medical tourism in the published literature, it is clear that there is the profound paucity of theoretical and empirical understandings of this practice that can help us to understand the patient's experience. We believe that the time is ripe for the social and health scientists from various disciplines to go beyond enduring speculations about patient's experiences of medical tourism. (Crooks, Kingsbury, Snyder, & Jhonston, 2010)

Another paper finds that service quality in healthcare is very complex as compared to other services. The results revealed that the patient's perceptions did not exceed their expectations. The paper adds a new perspective towards understanding how the concept of the service quality adopted in the hospital sector. (Bramhbhatt, Baser, & Joshi, 2011)

Research by Dina Loncaric et. al in 2015, demonstrates that patients using the services of the speciality hospital had a positive attitude towards hospital services. Medical rehabilitation services helped in improving the physical quality of their lives, and patients experienced enhanced mobility, reduced physical pain and medication addiction, increased energy levels and increased ability to carry out everyday activities. All this together had a positive effect on their life satisfaction. The patients of the speciality hospital who experienced an improvement in their physical quality of life following medical rehabilitation therapy were also satisfied with the medicinal and hospitality services provided by the hospital, and this too had a positive effect on their life satisfaction and their loyalty to the hospital. (Loncaric, Loncaric, & Markovic, 2015, Vol. 3)

Hospitality Elements in Hospitals

Physical environment, food, staff's responsiveness, and caring culture are the few of seven key indicators used for Hospital Consumer Assessment of Healthcare Providers and Systems, HCAHPS, first international and standardized, survey of patients' perspectives on and satisfaction with care given in hospitals. (CMS, 2010, July) The results of which now carry significant financial impact in areas that hospitals need to address. (Studer, 2012)

Alfred P. Sloan said, "*The hospital in certain respects is a very specialized hotel*". (Maloot, 1959 -1961) Sloan demonstrated that how hospital staff and healthcare executives could learn a lot from the operation style and management approaches used in the hospitality industry.

Punam Gupta etc. al., found that special services provided by the hospitals are the 4th major factor influencing the selection of the hospital. In the SWOT analysis done for the hospitals in Delhi NCR, she discovered that Services like Swift admission process, Good infrastructure with technology, Cleanliness and hygiene, Concierge services revealed as strengths but Interpreters services, delay and lack of info in discharge instructions, inadequate lodging arrangements, visa support, exaggeration of bills & corruption and lack of international cuisines, were major weakness. (Punam, Bhawna, & al, Vol 1, Issue 2, 2012)

Tapan K. Panda, found in his study that tangibles employed in the Hospitals are like Advanced Equipment, Qualified doctors, Quality Pathological Labs, and Operation Theaters and well maintained Doctor's Chambers. Tangibles in Service include -

1. Physical Facility;
2. The appearance of the personnel;
3. Tools and Equipment to provide the service;
4. A physical representation of the service;
5. Other customers in the service facility.

He also observed that tangibility, assurance, and responsiveness are the key influencers in customer satisfaction at hospitals and hospitality brands, as customer's choice heavily depends on these benefits. He found that independent variables like tangibility and reliability have higher significance compared to assurance, responsiveness, and empathy for the hospital sector. (Panda & Satyabrat, 2014, Vol XIII, No. 4)

Robeznieks found that in the present scenario of the growing competition, rising consumer expectations and the movement towards holistic treatments, hospitals are pressed to differentiate themselves based on the factors beyond the standard clinical outcomes and services. One indicator of this trends noted in modern healthcare's design awards is that healthcare architect frequently consults with a hotel or the resort designers to improve the patient experience. (Robeznieks, 2014)

Role of Hospitality Elements In patient's Satisfaction

Danaher & Haddrell reviewed over 40 literature and found different scales were used to measure consumer satisfaction for products or services, from retail to airline settings. They in their paper compared some of these common scales to evaluate their merits ([haddrell & Danaher, 1996, Vol. 7, Issue: 4](#)) *Andaleeb* proposed and tested a five-factor model which explained considerable variation in customer satisfaction with hospitals. ([Andaleeb, 1998, Vol. 11, Issue 6](#)) These factors include the quality of the facilities, the competence of the staff, communication with patients, their demeanour and perceived costs.

Padma Panchapakesan, from IIT Chennai, in her research, studied the relationship between service quality and customer satisfaction in Indian hospitals and found that the most important aspect of care is the interpersonal relationship with patients and their attendants. Patients and their attendants consider this interpersonal aspect of care as the most important one, as they cannot fully evaluate the technical quality of healthcare services. There are many studies to reveal that hospital service providers have to understand the needs of both patients and attendants to gather a holistic view of their services. She concluded that holistic view of Indian healthcare services displayed through multiple regression analyses on patient satisfaction and attendant satisfaction has provided insight that - Attendants are important stakeholders because they act as surrogate patients as well as act as caregivers. ([Padma, Rajendran, & Lokachari, 2010](#))

In 2014, *Suzane Markovic* concluded in her research that Patients attach considerable importance to cleanliness and neatness of the facility and equipment, the professionalism of the staff, their attitude towards patients and the reliability of service delivery. However, to gain a competitive advantage in the health tourism market, multi-speciality hospitals must improve the quality of services that fall out of the domain of medical services, such as hospitality services, sports and recreation, entertainment and social programs, and they should meet the expectations of patients in accordance with market trends. Therefore, to improve service quality, it is necessary to understand the importance of additional services provided by speciality hospitals and health spas, as well as to continue the survey of customer satisfaction and service quality. ([Markovic, Loncaric, & Loncaric, 2014, Vol. 20, No. 2](#))

However, very few studies are devoted which considers service quality for Indian patients in private hospitals. The study will contribute insight for researchers and managers for the decision-making process.

METHODOLOGY

This research aims at studying the present state & scope of hospitality services in hospitals, and to explore the patients' perception of hospitality services in JCI accredited hospitals at Delhi NCR, an exploratory research method is adopted. An extensive literature review and in-depth interviews with different key persons and hospital staff, involved as service providers, were conducted to find out the hospitality services and facilities provided to patients coming to Delhi NCR as a medical tourist.

Based on these insights gathered, an exhaustive questionnaire was developed to be used as a survey instrument, to collect the perceptions of patients and attendants as primary data, and study its relationship with overall patient satisfaction.

Survey instrument validation

The exhaustive questionnaire thus developed was put through a pilot test to test its validity. This instrument was presented to a panel of experts made of few academicians, hospital administrators, and fellow researchers to examine the correctness of the items and the construct. The instrument was also administered to fellow researchers, who have been admitted to any of the selected hospitals, to evaluate the readability and representativeness of the items and to verify the clarity in the questions asked. Thus face validity, construct validity and content validity were tested.

Sampling and Data collection

Patients, who are receiving treatment at any of the 7 selected JCI accredited hospitals and have been admitted for a minimum of 3 days, were selected as respondents. Data collection was done between Jan 2018 to Jan 2019. Data collection was done on convenience sampling rather than random sampling since the respondents being the patients, only those who gave consent for such interaction were approached. Convenience sampling was also recommended by ([Manaf, 2012](#)) for any patient satisfaction studies. 287 valid responses were collected from patients /attendants belonging to various geographical areas and from different demographic segments in total.

DISCUSSION / ANALYSIS

Personal interviews conducted with the executives and managers managing the non-clinical services for the patients revealed the following present state of medical tourism in hospitals, at Delhi NCR.

- Delhi NCR is quietly become the biggest medical tourism destination of the country, due to the availability of most of the good Indian Healthcare brands. Out of a total of 38 JCI accredited hospitals of India, 8 are in this region and thus making it the biggest healthcare destination in the country, for medical tourism.

- Delhi NCR, enjoying the best international connectivity, is also gaining most from the series of govt. initiatives, planned to boost the medical tourism in the country, floated in the last five years. For example – e visa and TVoA -visa on arrival for medical tourists, increased days of limit for e-visa etc.
- Govt initiatives to establish NMWTPB – National Medical and Wellness Tourism Promotion board, as a dedicated agency and the launch of the dedicated web portal for health tourism, in 3 different foreign languages has started pushing the inflow of foreign tourists in Delhi hospitals.

Most of the patient care Managers in these hospitals expressed that this changed scenario is creating huge pressure on the hospitals to perform better than others, in non-clinical aspects of the patient services since nothing much can be changed in the clinical aspects of the treatment. Some insights into the scope of the hospitality services in hospitals, as gathered -

- Attendants are being given more importance as no lesser customer and have gained the focus of service providers.
- As patients are often not in a correct physical and psychological state to judge the quality of the service, it is the attendant who is actually evaluating the services provided.
- Availability of in-room dining options and cuisines of different countries, are quickly gaining importance.
- Modern hotel suite like family rooms and gym, library and recreation facilities are becoming common.
- Touch screen in rooms, with service directory in foreign languages, are happening.
- Hospital signage in foreign languages and free availability of interpreters are not a distant dream anymore.

Hospitality practices in hospitals and service elements thus identified as an outcome of the in-depth expert interviews and the literature review are listed in Table-1. This exhaustive list was used to develop the questionnaire which was put through the pilot test.

Table 1: Shows the exhaustive list of hospitality services.

Accommodation / Room	Room Amenities / Supplies	Food and Beverages	Hotel Design Concepts	Hospitality Orientation of Services	Value addition in Service
Comfortable room size	Safety locker/box in room	Food choices / Variety	Welcoming grand lobby & common spaces	Neat & Clean Appropriately dressed staff	Tourism Packages
Decor and ambience of the room	services directory/touch screen in the room	24/7 room services	friendly hotel-style signage	Staff anticipates/serves for your individual needs and wants	Alternative medicines & naturopathy, mediations
Independent Temperature control in the room	international calls in the room	Different Dining Options	Pleasantness of Surroundings	Bell desk/bellhop at the lobby	Gym / library / game Centre
Quietness in the room	Wi-Fi/internet in the room	Availability of international cuisines	Special décor for kids	Smooth REGISTRATION PROCESS	Yoga / spa / massage center
Housekeeping and cleanliness in the room	HOTEL LIKE comfortable ROOM furniture	Dietary Counseling	Accessibility and convenience for disabled people	Smooth Billing & discharge procedure	VISA & travel support
The readiness of the room at your arrival after admission	Proper sleeping arrangement for attendant (to sleep in the room)	Taste and Flavor of the Food	Executive lounges	Staff Quickly corrects anything wrong	Patient Transport services
Transporting to the room	Modern Hotel suits like family rooms	Timeliness & Temp. of the food Served	Room ambience and the silent environment	Teamwork among all HOSPITAL STAFF	Concierge / Valet Services

Based on the comments from the expert panel and respondents for the pilot test, following changes were made - language for 3 negatively worded questions was changed, few redundant items were removed, 4 items were merged to form 2 items and the total layout of the questionnaire was modified. Two reversed scored items were also introduced to check the

boredom and to verify the attentiveness of the respondents. One open-ended question was also introduced to gather the respondent's views towards the future scope of the dimensions of the hospitality services. The final survey instrument had 10 questions on demographic and profiling of patients, 4 questions for satisfaction, and 32 items for measuring the perception of hospitality services on a five-point rating scale.

Scale validity Test

Cronbach's alpha is a good measure of scale reliability. This score was computed for all the variables. Cronbach's alpha coefficient of reliability ranges from 0 to 1 and a score greater than 0.8 is considered as "very good score" (Malhotra & Dash, 2015). The Cronbach's alpha score for all 36 scale items was .911, as shown in Table-2, reflecting a very high correlation among the variables. And it is concluded that the scale used is reliable and is a good measure of the construct.

Table-2: Reliability Statistics

Cronbach's Alpha	Cronbach's Alpha Based on Standardized Items	N of Items
.902	.911	36

Table 2.1: Scale Statistics

Mean	Variance	Std. Deviation	N of Items
78.54	216.117	14.701	36

Table-3 shows the descriptive analysis results for the collected responses. The results show that overall service satisfaction score is not more than the mean score of 2.5 and this indicates that for most of the services, the respondents were largely satisfied with the delivery of the services. The worst score is observed for the availability of International cuisines & gym and game facilities, the efficiency of discharge procedures and visa/travel support. Best performance is observed in neat and clean appearance of the staff, nutritional counselling and room size.

Table-3: Descriptive Statistics of Variables, Mean and Standard Deviation of Variables

Variable	Min. Strongly Agree	Max. Strongly Disagree	Mean	Std. Deviation	Remarks <2.5= good, >2.5 = bad
Variety and choices in food	1	5	2.11	.919	
24/7 room service	1	5	2.28	1.086	
Different dining options for attendants	1	4	2.29	1.117	
Availability of international cuisines.	1	5	2.95	.785	Very poor Score
Nutritional and dietary counselling	1	4	1.57	.776	Good Score
Taste and flavour of food	1	4	1.94	.734	
Timeliness & temp. of food	1	4	2.05	.763	
Room sizes are comfortable	1	3	1.56	.538	Good Score
Decor and ambience needs improvement	2	5	3.68	.786	Reverse Order
Independent temp control in the room	1	4	2.42	1.306	
Silence and undisturbed sleep	1	4	1.64	.680	
Housekeeping and cleanliness	1	5	1.83	1.013	
Comfortable patient bed and furniture	1	2	1.54	.499	
Sleeping arrangement for attendant	1	4	2.21	.979	
Welcoming grand lobby and common spaces	1	5	1.86	1.012	
Good signage and pathfinders	1	2	1.52	.500	
Pleasantly maintained surroundings	1	5	2.03	1.067	
Special theme decor for children wards	1	3	2.60	.687	
Conveniently accessible by disable	1	3	1.92	.591	
Gymnasium library and game facilities	1	5	3.10	1.097	Highest mean, worst performance
Well-designed lounges and Public Spaces	1	5	1.83	.831	
Neat & clean, appropriately dressed staff	1	2	1.45	.498	Lowest mean, the best performance
Efficient interpreter supports	1	3	2.09	.875	
Staff is courteous and well behaved	1	3	1.74	.505	
Staff often gives conflicting information	2	5	3.65	.810	Reverse Order
Staff anticipates individual needs and wants	1	5	2.41	1.057	

The registration process is efficiently managed	1	5	2.26	1.295	
Efficiently managed discharge process	1	5	2.87	1.207	Poor Score
Responsiveness and service recovery of staff	1	4	2.20	.801	
Visa and travel support	1	4	2.71	.786	Poor Score
Concierge and valet services	1	4	2.63	.842	
Sufficient options for mode of payments.	1	4	1.96	.706	
Well satisfied with hospitality at hospital	1	4	1.84	.571	
Likely to recommend to others	1	4	1.92	.813	
Well satisfied with medical treatment	1	5	1.66	.691	Good Score
Well satisfied with Indian hospitality	1	3	2.23	.727	

Note: Scale 1-5, (1= strongly agree, 5= strongly disagree), n = 287

Table-3.1: Summary Item Statistics

	Mean	Minimum	Maximum	Range	Maximum / Minimum	Variance	N of Items
Item Variances	.741	.248	1.706	1.458	6.871	.156	36

Exploratory Factor analysis was also done using the Principal Component Analysis (PCA) with orthogonal rotation (Varimax rotation) and all 32 variables were reduced to 4 Factors, as shown in Table-4. The principal Component analysis is more commonly used and preferred to reduce the number of variables to lesser no of factors. Varimax rotation is an orthogonal method of factor rotation that minimizes the number of variables with high loading on a factor, thereby enhancing the interpretability of the factor. (Malhotra & Dash, 2015)

All the items are having factor loading of more than 0.6 and this can be considered significant. Reliability analysis also carried out on all 4 factors and Cronbach's alpha score of factors were also in an acceptable limit. These factors were labelled as –

1. Service Orientation.
2. Supplies and Amenities.
3. Administrative working excellence.
4. Infrastructure and hospital setup.

Table-4: Factor analysis and Cronbach's alpha

Factor Named as	Variable	Factor loading	Cronbach's alpha
Service Orientation	Staff is courteous and well behaved	0.854	0.961
	Timeliness & temp. of food served	0.827	
	Silence and undisturbed sleep	0.787	
	Housekeeping and cleanliness	0.786	
	Neat & clean, appropriately dressed staff	0.782	
	24/7 room service	0.777	
	The staff never gives conflicting information	0.752	
	Staff anticipates individual needs and wants	0.673	
	Responsiveness and service recovery of staff	0.626	
Supplies and Amenities	Sleeping arrangement for attendant	0.778	0.924
	The variety and food choices	0.767	
	Different dining options for attendants	0.738	
	Availability of international cuisines.	0.718	
	Nutritional and dietary counselling	0.688	
	Comfortable patient bed and furniture	0.677	
	Taste and flavour of food	0.667	
Administrative working excellence	Sufficient options for mode of payments.	0.781	0.891
	Efficient interpreter supports	0.775	
	The registration process is efficiently managed	0.748	
	Efficiently managed discharge process	0.670	
	Visa and travel support	0.621	
	Concierge and valet services	0.601	
Infrastructure & Hospital setup	Room sizes are comfortable	0.738	0.863
	Independent temp control in the room	0.719	
	Welcoming grand lobby and common spaces	0.699	
	Good signage and pathfinders	0.694	
	Pleasantly maintained surroundings	0.681	

	Special theme decor for children wards	0.669	
	Conveniently accessible by disable	0.647	
	Gymnasium library and game facilities	0.627	
	Well-designed lounges and Public Spaces	0.603	

CONCLUSION

The study finds “**Service Orientation**” emerging as the biggest and important predictor of Patient satisfaction from both patients’ and attendants’ perspectives. This finding also agrees with the existing literature in healthcare as well as other services. Different other factors like – “**Supplies and Amenities**”, “**Administrative working Excellence**” and “**Infrastructure & Setup**”, also impacted the satisfaction levels of patients and attendants.

1. **Service Orientation** generally means the emotional and personal care, but here it means neat, clean and courteous uniformed staff which can anticipate the guest's need and who never gives any conflicting information, and is responsive enough to maintain cleanliness and undisturbed, silent surroundings.
2. **Supplies and Amenities** emerged as the second-highest important aspect of hospitality services. It covers quality and variety & choices available in food for patients and attendants and nutritional & dietary counselling provided.
3. **Administrative procedures and working excellence** emerged as the third important domain. It covers the procedural efficiency aspect of the admission, discharge, travel/ visa & interpreter support, mode of payment and concierge services.
4. **Infrastructure and Hospital Setup** was found to be the fourth important domain. Room sizes, independent temperature control, accessibility for disabled, good signage and pathfinders, theme décors, well-designed lounges and public spaces and availability of gym and game facilities are covered in this domain.

The study suggests that from the patient's satisfaction point of view, the greatest difference between expectations and perceived quality was found in those variables related to additional services. These are the services that these multispecialty hospitals claim to be providing to medical tourists. Services like international cuisines, interpreter services, VISA assistance, quick admission and discharge procedures, gym, library, sports & recreation facilities, social and entertainment programs are main areas of disappointments. Most of the hospital brands propagate to fulfil the special requirements of patients in accordance with market trends but fail to do so. Although the expectations of the patients are lower regarding those services, the large service gap is evident from the relatively low score on the satisfaction scale.

Patients attach considerable importance to the cleanliness and neatness of the facility and equipment, the professionalism of the staff, their attitude towards patients and the reliability of service delivery.

However, to gain a competitive advantage in the health tourism market, speciality hospitals must improve the quality of services that come out of the field of medical services, such as hospitality services, sports and recreation, entertainment and social programs, and they should meet the expectations of patients in accordance with market trends. ([Padma, Rajendran, & Lokachari, 2010](#))

"India is currently well positioned in cost-effectiveness and clinical outcomes but lags in Tourist friendliness." - *FICCI Knowledge Paper, Medical Value Travel in India (Enhancing Value in MVT), Page 51, Appendixes E, Published by IMS health India. (FICCI & Quintiles IMS, 2016).*

LIMITATIONS AND STUDY FORWARD

This study is limited to the hospitals with JCI accreditation received before Jan 2018. Two more hospitals which received their JCI accreditation later than Jan 2018 were not included in the study. This study also skipped touching the behavioural aspects of the clinical staff, which was found to be sensitive subject area and fearing non-cooperation from the hospital management and staff for approaching their patients with questions relating clinical service quality, this was not included in the study.

This study collected responses from Indian and foreign patients coming to these hospitals but did not attempt to study the difference in their perception of the quality of hospitality services provided at the hospital. In future, researchers can attempt to study the difference in the perception of Indian and foreign patients towards the care provided at multi speciality hospitals at Delhi NCR.



RECOMMENDATIONS

A trust created by the knowledge base and the competencies of Indian doctors, across the world is reflecting in continually increasing the inflow of the international patients as a medical tourist in our Indian Hospitals. It is the time to build upon this and also to serve those with best of our services to send them back not only as a happy patient but as happy tourist also.

It has been evident from many researches that India is positioned very well on cost-effectiveness, and does fairly well on alternate medicines also. But some researches show that India is lagging in providing a visitor-friendly environment

Finally, healthcare organizers have to consider healthcare delivery as an amalgamation of the events and services rather than an isolated delivery. Patient's attendants are recognized as important stakeholders in the future decision making and they are having more direct encounter and first-hand opinion on the majority of service deliveries. Knowing that Service Orientation of the Employees, Administrative Excellence, and Infrastructure & Special Services, plays the role of the highest motivator for patient satisfaction, the vast potential to improve the customer experience is still to be tapped.

Selected elements, as mentioned by respondents, have the potential for future incorporation. This include executive lounges, complimentary wireless Internet and refreshments, quick registration and discharge procedures, flexible furniture in rooms, gym or health spas, Gaming and recreational facility, better interpreter supports, separate temp. Control in rooms, international cuisines, better family accommodations for post-treatment stay, etc.

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