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A Study on Customer Relationship Management with Special Reference to Private Hospital in Tiruchirappalli

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ABSTRACT

The aim of this study is to investigate, identify and compare Human Resource Management (HRM) practices in private hospital in Tiruchirappalli, Tamil Nadu India. Self developed survey; based on literature reviews are an instrument used for data collection. The findings of this study such as social characteristics sex, ages religion, community, nativity etc., are important for understanding the needs of human resource management practices in hospitals. This study also deals with the contributions of different factors towards quality care of patients and work culture among the staff.

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Introduction

Human resource management in health care industry seeks to improve the excellence of services and patients satisfaction. Health care quality is generally defined in two ways: technical quality and socio-cultural quality.

Technical quality deals with the impact that the health services available can have on the health condition population. Socio-cultural quality mentions the degree of acceptability of services and the ability to satisfy patient expectations. Better use of the range of health care providers and better coordination of patient services through inter disciplinary team work have been required as a part of human resource management.

Management of hospitals thus draws our notice on planning, organizing, staffing, directing, communicating and controlling a social institution professionally which makes accessible to the patients quality Medicare services at an reasonable price. It also focus our attention to managing the functional areas of hospitals with the motto of "serving the society", such as management of human resources, management of material, management of finance and management of marketing. Hospital management is an combination of two words "Hospital" and "Management". It is managerial process of practicing the principles management. It is a social process because we also consider hospital a social institution. It is based on the holistic concept of management that necessitates sub serving of social interests. It is a science and more so a profession because the hospital managers/administrators need proper education and training for achieve perfection.

It is the management of an organization which is not supposed to make profits. It is based on professional excellence where an administrator is required to blend optimally the core and peripheral services.

To initiate a comprehensive understanding of building relationships between suppliers and operations personnel within the hospital services to result in excellent CRM.

Tele: E-mail address: kumaraguruautt@gmail.com ambulance personnel, and diagnostic report division personnel. These are the people with whom the customers have an immediate bearing.

The level of patient's satisfaction was determined with five factors relating to hospital stay. Nursing care appearance

nurses, attendants, reception personnel, billing personnel,

Some of the visible hospital personnel include doctors,

five factors relating to hospital stay. Nursing care appearance of the room, attitude of the hospital staff, and quality of the food and billing procedures. It was found that perception of non-medical factors played a substantial role in the patients overall evaluation of his hospital [1]. Healthcare quality in actively managing consumer perceptions of is important for several reasons. First, evaluations of higher quality are related to satisfaction, intention to use a service again in the future if necessary[2]. Health-care customers in out-patient clinics, perceived waiting times tended to affects the patient's evaluation of the wait more than the actual waiting times[3]. Healthcare Services in the US, points out that healthcare in the US is changing rapidly from the traditional system, where the hospitals and clinics are administered largely by government and non-profit organizations to the modern system giving way to a regime of managed care run increasingly by the private sector[4].

Patients' highest expectations were with respect to feeling safe during treatment, with staff behaving in such a way as to instill confidence and having the knowledge to answer patients' questions following close behind in terms of importance. Patients also expected staff to have their best interest at heart, understand their specific needs and be able to show a sincere interest in solving patient problems [5].

Health care leaders and trustees must ensure that patient safety becomes (and stays) one of the organization's primary goals and business imperatives. The ethical imperative for patient safety (First, do no harm), represents the fundamental philosophy of medical care dating back to ancient Greece and the physician's Hippocratic Oath.

This dimension assesses the patient's view of the overall experience of medical care he/she received at this hospital [6].

The objective of this study is to find out how the Customer Relationship Management strategies are viewed by patients and healthcare providers. Hence it will indicate whether the existing strategies are to be modified or not. The study also aims to find out the level of satisfaction of patients on different services provided to them and the areas of their dissatisfaction which will indicate how far they are satisfied and on what fronts dissatisfaction exists so that remedial measures can be undertaken by hospitals.

Methodology

HRM practices were analyzed to examine the influence of these practices on job satisfaction level of patients through defined questionnaire for doctors i.e. hospital administrators. cross tabulations and sample percentage value interpretations were developed. All statistical data is also represented by suitable charts in presentable manners for better understanding.

Analysis and Findings

The researcher used a questionnaire for collecting the data. The data is analyzed and results are graphically presented as below:

Social Characteristics

Social class refers to the social position an individual occupies in a society. Individual and society are inseparable and have mutual influence on each other. Thus in all societies, sociological conditions of people differ based on factors such as sex, ages religion, community, nativity etc. An attempt is made in the study to analyze the social characteristics of customers based on sex, age, community, religion, nationality, nativity, occupation marital status, family structure and size. Gender Wise Classification

Health problems occur at all ages in both sexes. But the frequency, intensity type of problem and the healthcare requirements differ for males and females. A consideration of the gender bias in healthcare focuses on the severity of diseases, the specific health problems faced by men and women and the healthcare needs of each gender. Keeping this in view, an attempt has been made in the study to know the sex-wise distribution of the patients.

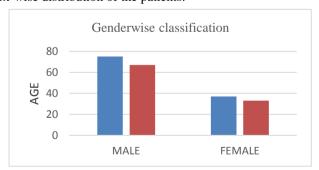


Figure 1. Gender wise Classification interpretation

In gender wise classification, Mostly 67% respondents are male. Remaining 33% respondents are female.

Age Wise Classification

Age is an important variable because it has direct relation with one's mental maturity and the consequent awareness about what is going on in the society. Important shifts occur in an individual's demand for specific types of products and services as one goes from being a dependent child to a retired senior citizen. Marketers have found age to be a very useful sector indicating a change in the consumer interest and product needs which vary with age Health problems occur in all ages but the frequency will be differing in different ages. The frequency may be more in childhood and old age because of low resistance in the body. Hence, the medical and healthcare requirements of different age groups can't be

identical. With increasing age levels, people require a wide range of healthcare facilities of preventive and curative nature. In this background, an attempt has been made to know the age-wise distribution of the patients.

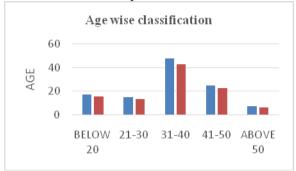


Figure 2. Age wise Classification interpretation.

In Age-Wise Classification 42% respondents are in the category of 31-40. Next 22% respondents are in the category of 41-50. 15.7% respondents are in the category of below 20.13% respondents are in the category of 21-30. Remaining 6% respondents are in the category of 51 and above.

Education wise classification

Education is considered to be the chief means of social awareness and development. Education makes man a rational thinker. An educated person knows the importance of healthcare and uses the best available healthcare services. Educated persons have access to mass media and communication channels and are more likely to take preventive measures than less educated persons. Heath-awareness of an educated person provides him/her the opportunity of timely utilization of healthcare facilities. Hence, it is assumed that there is a direct relationship between one's level of education and one's intensity of response to the health-related problems.

In this background, an attempt has been made in the study to know the educational background of the patients. The educational background has been broadly classified into six categories, namely, patients with up to SSLC, HSC, PG, Professional and Others. It can be understood from the above that a large proportion of the patients going to private hospitals are having education of either inter or higher. The reason behind this may be the increasing literacy levels in the country, increasing education of women and growing importance of higher education in the society. It can be seen that majority of the patients going to private hospitals are highly educated with either PG or UG background. This may be because most of these people are jobholders, professionals and retired persons who have high-level occupations, highincome levels and different sources of financing health services. Secondly, these educated people have more access to the changes and developments in the society. Hence, they are likely to be more aware of health-related problems and effective utilization of the available healthcare facilities.

In Education -Wise Classification 50 % respondents are in the category of UG. Next 18 % respondents are in the category of respondents are in the category of PG. 16% respondents are in the category ofprofessional.11% respondents are in the category of up to HSC and 1.7 % respondents are in the category of others.

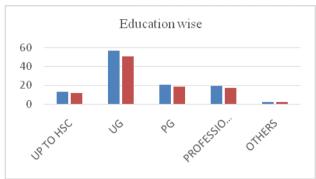


Figure 3. Education wise Classification interpretation. Occupation Wise Classification

Occupation is an important socio-economic variable that decides one's social, cultural and economic status. Occupation is a widely accepted and probably the best documented measure of social class, because it reflects one's status in the society. In reality, however a close relationship exists between occupation, income and education. A person's occupation has a direct effect on his choice of goods and services. People having higher level occupations and elite professions are more quality conscious and take their family members to better healthcare organizations.

In this background, an attempt has been made in the study to know the occupational background of the patients. The occupational background of the patients has been broadly classified into five categories, such as agriculture, business, job, profession and others. The occupational background of the patients reveals that majority of the patients going to private hospitals are jobholders

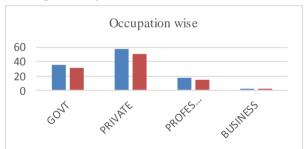


Figure 4. Occupation wise Classification interpretation.

In occupation -Wise Classification 50.89% respondents are in the category of private. Next 31% respondents are in the category of govt.15.7%respondents are in the category of professional. 2% respondents are in the category of business. It can be observed that there is a reasonable size of professionals going to the private hospitals. The reason for this may be their steady income levels and together with the jobholders these two groups have more knowledge and awareness to health related problems and give importance to utilization of quality healthcare facilities. It can be seen that the other important category going to the private hospitals is the business group. The reason may be because the business people also constitute a large group in Trichy and other urban centres and many of them make profits in their business. Secondly, along with their income levels, the business people have the ability to case money from various sources using their business and social links for financing healthcare.

Monthly Income Wise Classification

Income is an important socio-economic variable because it indicates a person's ability or capacity to purchase a product or service. A person's economic position consists of his or her expendable income, savings and assets, ability to borrow and attitude towards spending versus savings.

High-income group, middle-income group and low-income group are income-related classifications of the population. It is assumed that each group has its own

consumption pattern. As far as healthcare is concerned, income will have profound impact in the selection of hospitals and influences a person's ability to have high-tech medical aid.



Figure 5. Monthly Income Wise Classification.

In income -Wise Classification 34.82% respondents are in the category of 5,001- 10,000. Next 22.32 % respondents are in the category of 15000-20000. 29.46% respondents are in the category of 10001-20000.10.7 % respondents are in the category of below 5000.

Income-wise distribution of the patients shows that fourfifths of the patients going to the private hospitals belong to middle income and high-income groups. The reason for middle and high-income groups to be high may be because there is a large proportion of job holders in Trichy and other urban centres who belong to these two income groups and jobholders constituted a majority of the patients going to private hospitals in Trichy. Moreover, a large and more informed middle class with increased paying capacity and willing to pay for quality healthcare in the private sector has emerged very fast in recent times. The reason for the patients in the high-income group to be high could be because they have relatively higher incomes, which enable them to seek quality healthcare services available in the private hospitals. More number of middle and high, income groups going to private hospitals may be because of the availability of specialists and a large number of super specialty departments, availability of guest room service for the attendants of patients belonging to single, deluxe and super deluxe rooms, entertainment facilities, emergency and trauma care, mobile hospital, ambulance services and many other additional facilities.

Conclusion

The socio-economic analysis of the customers reveals that the health needs of the people differ across age, sex, community, place of living, occupation and income. It is found in the study that majority of the patients going to private hospitals are in the age groups of 40-50 years and 31-40 years, mostly males. Almost all the patients are educated, mostly with a degree level qualification and above and majority of them are jobholders. The study on family structure and size reveals that majority of the patient's belonged to nuclear families having 3 to 4 members as their family size.

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