

A Conceptual framework on patient's perception of healthcare service quality, and discussion on recent trends in Indian healthcare sector

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Abstract

The patient's perception of the healthcare service quality are matter which varies gender wise, age wise, culture and jurisdiction wise, etc., so many literatures have been approached in different ways. This study attempts to consolidate the opinions of various authors on service quality perception of patients by reviewing different articles on the same topic on a conceptual basis. This discussion is followed by the major factors affecting the health along with accessing to the new trends in the Indian healthcare sector on the basis of data from the secondary source of information. Here the findings indicate that every perception and determinant related to the healthcare are connected with the socio-economic, demographic-cultural, technical and politic-legal environment.

Keywords: Patient's satisfaction, patient's perception, service quality, hospitals, healthcare sector

Introduction

Patient satisfaction is the absolute measurement in healthcare which can influence the potential of the service provider in the market. There are different types of dimensions in the perspective of both service provider and patients, those aggregated and discussed by the experts in different articles. Each of the dimensions have proved their power to influence the happiness of patients and their relatives in a different manner. This study is especially going to discuss the various elements behind the success of patient's smiles in the healthcare mechanism by using a reviewed mode of

study from various articles. It will be an opening slot to the people who would like to use the information regarding successful healthcare system from the past literature as well as the recent thoughts. This study makes an attempt to explore the backup factors which are vital in social background of the people and playing a decisional influence in healthcare. At the end of the study, it focuses on what is the latest trend in the healthcare system which can provide the information about the current status and future expectation in Indian healthcare sector.

Healthcare is nothing but an organized effort which provides a caring

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mechanism to the health of a person or a community, where people are selecting their own convenient methods to ensure if their health is going well or not. Now a day's healthcare becomes a process that includes maintenance or improvement of health via the diagnosis, treatment, and prevention of disease, illness, injury, and all other types of physical and mental impairments in human beings. There are different types of healthcare mechanisms offered by the health professionals and the same is scattered into several levels or branches like the physician, dentistry, midwifery, nursing, medicine, optometry, pharmacy, psychology and other health professions. It includes an offering of health protection in primary care, secondary care, and tertiary care as well as in public health.

Access to healthcare is largely influenced by social and economic conditions of the people as well as the health policy of the local government. The plans and policies related to the implication of the healthcare strategies depends upon the needs and wants of the people located in a particular region, but the services will be offered to them on the basis of available resources only. Generally, the healthcare system is partitioned to different modes of treatment like Allopathic, Ayurveda, Unani and homeopathy etc. which are the popular ones. So the selection of these methods is totally based on characteristics, lifestyle, jurisdiction and socio-economic background of the people. According to world health organization (WHO) "A

well-functioning healthcare system requires a robust financing mechanism, a well trained and adequately paid workforce, reliable information on which to base decision and policies, and well maintained health facilities and logistics to deliver quality medicines and technology.

The new trend in the healthcare system is, it is becoming as a key determinant in promoting the general, physical and mental health and well being of people domestically as well as abroad. Presently as part of the competitive performance of both private and public healthcare providers of the sector, the industry comes to the phase of strengthened coverage, services and increased expenditure among the world. The total healthcare industry size in India is expected to touch US\$160 billion by 2017 and US\$ 280 billion by 2020.

Even though from the latest report of the India brand equity foundation (June 2017), which is functioning as a trust established by the department of commerce under the ministry of commerce and industry indicating that India is expected to rank amongst the top three healthcare markets in the world by 2020.

So, it is a study mainly conducted to focus on what are all the dimensions of the service quality which accomplish the patient's satisfaction or happiness. Whereas the service quality consistency varies between region and sectors. "Unlike product quality, service quality is hard to

define and measure as a inter-relationship between user expectation and impact on specific features in service such as intangibility, heterogeneity, and perishability” (Parasuraman et al, 1985; Zeithaml et al, 2006). so, the ultimate “satisfaction with a service provider is perceived as being both an evaluative and emotion based response to a service encounters” (Oliver 1997).

Review of literature

Aygul Turan and tuba Buzaykut-Buk (2016) examined the effect of healthcare service quality on patient’s satisfaction, repatronage intention (RI) and positive word of mouth (PWOM). They found that service quality significantly influenced patient’s satisfaction, repatronage intention and positive word of mouth. On the basis of SERVQUAL dimensions study arrived at the conclusion that responsiveness and reliability found to be the most influential factors in patients RI and PWOM. The tangibility dimension proves the strongest influence on patient’s satisfaction.

B. Thangaraj and M R Chandrasekar (2016) investigated patient’s perception about service quality in corporate hospitals by using SERVQUAL dimensions along with other variables. The results identified that some variables like high treatment cost, the human and economic threat posed by communicable diseases, unnecessary tests, lack of sound public relations and non utilization of services of specialized people also played a major role in the perception of patients.

Thambirasa Sathiyaseelan, W.K. Athula C and Ganapala (2015) examined the impact of the service quality on patient’s satisfaction in the government ayurvedic institutions by using five-dimensional service quality model and he concluded that service quality significantly contributed to the patient’s satisfaction.

Rama Koteswara Rao Kondasami and Rajeev Kumar Panda (2015) tried to analyze “how perceived service quality and customer satisfaction lead to loyalty towards healthcare service providers”. Customer satisfaction, loyalty, and SERVQUAL are put for the analysis here. From the study, they arrived at the conclusion of service seeker-service provider relationship; quality of facilities and interactions with supporting staff has a positive effect on customers or patients perception.

Dr. Darshana R. Dave and Reena Dave (2014) conducted a study to find out the factors affecting the selection of hospitals by the consumers. Where the respondents were given more preference to doctors’ qualifications, the experience of doctors, and reputation of the hospitals were major influencing factors along with the extra facilities offered by the institutions or hospitals.

Faris .S. Alghamdi (2014) examined the impact of service quality perception on patients satisfaction to determine which one of the SERVQUAL component has the greatest impact on patients satisfaction. Analysis of variance

(ANOVA) revealed that there exists a statistically significant impact on health service quality on patient's satisfaction, and empathy dimension has the greatest influence on patients satisfaction and it is followed by tangibles and responsiveness.

Arne De Keyser and Bart Lariviere (2014) executed a study on the "impact of technical (what is delivered) and functional (how it is delivered) service quality on consumer happiness in a multi-channel environment", where the variables used for the analysis were consumer happiness, technical quality, and functional quality. And the study found that both technical and functional service quality indicating a positive impact on consumer's happiness.

As part of literature mentioned here as reviews there exist more articles on the same influence of service quality dimensions on the patient's happiness. So, only relevant as well as the recent articles were mentioned here. From the reviewed literature author can observe that, there are several dimensions or components which can contribute a minimum level of satisfaction in his/her post treatment period. That is why this study is very relevant, because it tried to collect more information regarding service quality dimensions, which is not particular to one or two authors. Whereas the findings of many experts are pooled together here to conduct the discussion on the mentioned topic. And here the reader can feel how the collective opinions are integrated in a particular manner along with the

discussion of recent trends in the healthcare sector in India.

Objectives of the study

1. To identify the different perceptions of service quality which accomplish the patient's satisfaction in the healthcare mechanism.
2. To understand the social factors which influence the health of the human being.
3. To evaluate the recent trends of the healthcare sector in India.

Methodology

This study consists of three main objectives where the first objective is the supreme one which is examined with the help of more than twenty reviewed articles. Other two objectives are supporting to the main and the information for the same is collected from the secondary sources such as reports published by the department of healthcare and tourism and reports from the ministry of commerce and industry. So, it is a conceptual or theoretical approach of study that is used, along with some graphs and tables to explain the information from the authentic sources only.

Discussion

Presently the service sector is going through almost revolutionary change, which dramatically affects the way in which we live and work. New services are continually being launched to satisfy our

existing needs and to meet needs that we did not even know we had. Even though here the focus is only on the healthcare services and how it is effective among the patients is the major topic of discussion.

In this section, the study is going to investigate the significant dimensions of the service quality in patient's happiness. So, the discussion is structured as under different heads like service quality models, the quality perception in healthcare services, perceived service quality-satisfaction and loyalty, service quality-service value and satisfaction on behavioral intention, technical and

functional service quality and last, the objective summary is given. Later on that the other two objectives are examined under the heads named social factors affecting health and recent trends in healthcare sector respectively.

Service quality models

Before going to the main context of the objectives the reader must be aware about what are all the existing service quality models available to the people who are interested in it. So, the table given below can provide a brief picture of the service quality models.

Dimensions of Service Quality Models		
Study	Model	Dimension
Gronroos, 1984	Service Quality model	Technical quality, Functional quality, corporate image.
Philip & Hazlett, 1997	PCP Model	Pivotal, Core, Peripheral attributes.
Parasuraman et al., 1985	GAP Model	Reliability, Responsiveness, Competence, Access, Courtesy, Communication, Credibility, Security, Understanding/Knowing the Customer, Tangibles.
Haywood-Farmer, 1988	Service Quality Attributes	Physical facilities, processes and procedures, People behavior and conviviality, Professional judgment
Parasuraman et al., 1988	SERVQUAL	Tangibles, Reliability, Responsiveness, Assurance, Empathy.
Cronin & Taylor, 1992	SERVPERF	Same as SERVQUAL but with performance only statements
Frost & Kumar, 2000	INTSERVQUAL	Reliability, Tangibles, Assurance, Responsiveness, Empathy (SERVQUAL).

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Dabholkar et al.,1996	RSQS	Physical aspects, Reliability, Personal interaction, Problem solving, Policy
Brady & Cronin,2001	Service Quality Model	Personal interaction quality, Physical service environment quality, Outcome quality.

(Source: Yarimoglu, E. K. (2014). A Review on Dimensions of Service Quality Models, 2(2), 79–93.)

Gronroos and others suggest that “the perceived quality of a service is the result of an evaluation process in which customers compare their perceptions of service delivery and its outcome against what they expect”.

The service quality research is strongly user oriented. Where Zeithaml, A. Parasuraman and Leonard Berry found a “high degree of correlation among several variables and so consolidated” them into five broad dimensions which are popular in using as the service quality measurements now. Those are

1. Tangibles (Appearance of physical elements)
2. Reliability (Dependable, accurate performance)
3. Responsiveness (Promptness and helpfulness)
4. Assurance (Competence, courtesy, security, and credibility)
5. Empathy (Easy access, customer understandings, and good communications)

Quality perception in healthcare services

Health care service quality perception is “a judgment of whether the service

proffered for a patient was the most appropriate to produce the best result that could be reasonably expected by the patients and whether that service or those services were delivered with due attention to the doctor or patient relationship” (Martinez Fuentes, 1999) and it supports positively that effect of doctors and nurses perceived skills on patients quality perceptions. Here the patient is able to infer an evaluation of his/her care through the skills shown by the doctor/surgeon and nurses when dealing with them (Trimble et al.2006). So there exist various quality dimensions behind the successfulness of medical services by the way of complimenting and integrating the entire system of technical feature perception.

Generally, the service quality is measured from the angles of functional quality and technical quality. Functional or interaction quality means how the service is delivered and technical quality means what is delivered. So these are believed to shape service quality perception (Gronroos, 2001: Donabedian, 1988). Both “technical and functional aspects of service quality are equally evoked when the service is subject to customer evaluation” (Brady et al., 2006;

Gronroos, 2001; Brady and Cronin, 2000; Donabedian, 1988).

Perception of quality is the “consumer’s evaluative judgment regarding the superiority of service performance” (Zeithaml, 2000). Some attitudes have the strong impact on consumer behavior, where some variables do not have influence on the patient’s action in healthcare (Van Doorn et al., 2007; Agarwal and Malhotra 2005). If there is a missing of just one performance in the service delivery, it can lead to an overall negative perception among patient’s and his/her relatives (Otani et al., 2004; Cronin, 2003; Brady et al., 2006). word of mouth from poor performance exceeds those resulting from positive performance represent a positive non-linear effect (Cronin, 2003; Watkins and Lin, 1996). The specialty of healthcare service is that there is no trade off between attributes (Otani and Harris, 2004).

Perceived service quality, satisfaction, and loyalty

In the early stages itself, “service quality was noticed as an important term in relation to profit, cost saving and market share” (Devlin and Dong, 1994). Especially in healthcare sector, the assurance of service quality would be the motto of certain service providers. And also there exist influence of customer satisfaction (Taylor and Baker, 1994) and purchase intentions (Zeithaml et al., 1996) on service quality. These variables are playing major roles in the discussion of service quality after the 1990’s.

In 1984, Gronroos defined “Perceived quality as the evaluation process, where the consumer compares his/her expectations with his/her service perception”. Patient’s service quality perception is founded as a key determinant in the healthcare organizations success owing to its primary role in achieving patient’s satisfaction and hospital profitability (Donabedian, 1996).

According to Parasuraman et al. (1991) “service quality attributes are not expected to be equally important across service industries”. Manimay (2014) suggest that “providing effective training to nurses, doctors and support staffs on interpersonal skills and effective communication leads to inpatient satisfaction”. Likewise Holmberg (2012) argued that physician and nurses both should be targeted to improve the service quality. In 2011, Peer and Mpinganjira found that “service quality is an important factor in ensuring patients overall satisfaction and loyalty towards a private medical practice”.

In a classic study of Reich held and Sasser, they comment that “The profit peer customer in various services businesses categorized by the number of years that a customer had been with the firms”. The researchers found that the longer customers remained with a firm in each of this industry, the more profitable they become more serve.

In 1997, Oliver referred to “loyalty as the stated likelihood to engage in a particular behavior. Loyalty is considered

to include a willingness to recommend, revisit and positive word of mouth (PWOM) intentions". They also undergo a cognitive decision making process about whether to stay with or leave a service (Zaithamel, 2000). Whereas in 1996, Zeithaml et al. Grouped "behavioral intentions into favorable positive feedback, recommending, remaining loyal and paying more and unfavorable loyalty as negative feedback, switching to another organization, complaining to external agencies and doing less business with a company". In an overall point of views, the studies indicated that "service quality and satisfaction has a direct relationship with word of mouth and words per minutes" (Ladhari, 2009; Hanzae and Shajaei, 2011).

Service quality, service value, and satisfaction on behavioral intention

Important issues noticed in between service providers are, they are operating without giving proper attention to the value of each customer otherwise, it can be said that there is no equality in service provided by such service providers. Instead of all that now the organizations/institutions are the focus on the "number of customers", they serve to maximize their profit. But in the case of maximizing profits in the healthcare sector, opinions from the patients are that type of service providers cannot exist in the market whereas only the customer/patients satisfaction plays the major role in capturing a particular market. The literature argues that "customer

satisfaction is the result of a customer's perception of the value received. Where value equals perceived service quality relative to price" (Hallowell, 1996). The first determinant of overall customer satisfaction is perceived quality and the next one is perceived value (Fornell et al., 1996). Patients satisfaction is recognized as being highly associated with the value and is based conceptually on the amalgamation of service quality attributes with such attributes as price (Athanasopoulos, 2000).

Satisfaction is an evaluation of an emotion (Hunt, 1977) due to its potential influence on consumer behavioral intention and customer retention (Anderson and Fornell, 1994; Anderson and Sullivan, 1993; Cronin and Taylor, 1992; Fornell, 1992; Oliver, 1980; Oliver and Swann, 1989), consumer satisfaction has been the subject of much attention in the literature. Where the satisfaction with the service the provider is perceived as being both an evaluative and emotion based response to a service encounters (Oliver, 1997).

In addition to that, perceived value is the consumers overall assessment of the utility of a product/service based on the perception of what is received and what is given (Zeithaml, 1988). In an overall sense with the influence of service quality, service value and satisfaction experts (Zeithaml, Berry and Parasuraman, 1996) suggest that "favorable behavioral intentions are associated with service providers ability to get its customers to

say positive comments about them, recommend them to other consumers remain loyal to them (Repurchase from them), spend more with the company and pay price premium”.

Technical and functional service quality

How the technical and functional service quality drives the consumer happiness is analyzed here from the perspectives of different authors. As everybody knows different kinds of services are an integral part of consumers daily lives. “service quality has been acknowledged as a method for outperforming competitors and ensuring long-term profitability in competitive marketing environments” (Kandampully, 1998; Parasuraman et al., 1985). so, it has a significant effect on business outcomes, such as customer retention (Conlon et al, 2001), word of mouth (Boulding et al, 1993; Parasuraman et al, 1991), share of wallet (Lariviere, 2008), and profitability (Roth and Jackson, 1995; Rust et al, 1995).

In 1984, Gronroos identified two forms of service quality, which is technical and functional. Functional quality instead entitles the way the technical quality gets transferred to the customers, such that it relates to the satisfaction that the service recipients feel towards the process or experience of receiving the service (Arora and Stoner, 1996). Whereas Berry et al. (1985) and Parasuraman (1985) argued that service outcomes get judged by both the outcome of the services and the process leading to that outcome. So, the

literature supports the opinion that technical and functional quality may differently affect services outcomes (Dagger and Sweeny, 2006). Even though ultimately the consumer or patients needs happiness. Where the “service has been directly or indirectly linked to a number of customer outcomes, including customer satisfaction” (Cronin and Taylor, 1992; Kang and James, 2004; Lassar et al, 2000; Lariviere, 2008), “customer trust” (Chiou et al, 2002; Sharma and Patterson, 1999), “loyalty intentions” (Anderson and Sullivan, 1993; Bell et al, 2005; Jones et al, 2002; Varki and Colgate, 2001), “repurchase behavior” (Conlon et al, 2001), share of land (Lariviere, 2008), “word of mouth intentions” (Boulding et al, 1993; Parasuraman et al, 1991), and “profitability” (Roth and Jackson, 1995; Soteriou and Zenios, 1999).

Summary

From the perspectives of different authors on service quality dimensions in patient’s satisfaction, the study can conclude that there exist many dimensions like tangibles, reliability, responsiveness, assurance, empathy as SERVQUAL variables and like that “competence, access, courtesy, communication, credibility, security and understanding/ knowing the customers” (Parasuraman et al, 1985) are also carrying a vital role in services quality of a service provider. And now literature is discussing on more contributions of perceived quality, perceived value, and behavioral intentions

including word of mouth, loyalty, personal recommendations and willingness to pay for the services. So, healthcare quality can be improved by accepting the different perception of patients and their relatives regarding the service delivery those are discussed above and adopting actions like supportive visionary leadership, proper planning, availability of resources, education and training, effective management of resources, employees and processes and collaboration and cooperation among the providers.

2. Social factors affecting health

The departments of public health of different countries are regularly reporting their ups and downs of the year's projects conducted to maintain the health status of the same people. For the convenient maintenance of the health of the population, the governments have embraced a broad concept of health and wellbeing. The study took a model of the department of public health, San Francisco, which explains the different factors influencing the population health in general. The discussion is based on three major determinants of the health named social determinants, physical determinants, and behavioral aspects (RG Evans and GL Stoddert, 1990).

Under the social determinants, the income distributed among the people of a country is leading factor which can influence the healthcare system of an individual or a family/group. Usually, income depends on the employment of

individuals. That can change the spending behavior of them. That is why there are scientific evidences which supports employment status is affecting health status. In 2010, bureau of health promotion, KDHE found that "unemployed adults have poorer mental and physical health than employed adults" and that may vary place to place. So the income level placed a crucial role in social aspects. Apart from that housing and homeless is another issue faced by the people in India and abroad. Without a proper care under a shelter people are suffering a lot from different diseases especially children and women who are having less immunity. Racial disparities are also coming under a social issue which makes people separated among themselves, it will lead to discrimination between humans in the delivery of proper healthcare treatment. Another important factor is education. Education level indicates a strong body of evidence of the measure for assessing socio-economic status. In a study of US census bureau, they revealed that "low education levels are linked with poor health, more stress, and lower self-confidence". Whereas higher education predicts good health. Because education in the sense overall education which can assure proper health care through access to adequate food and shelter.

Physical environment is the platform which exists beyond the control of an individual and his behavior. Especially the factors included here are the quality of air and water. This can only provide the basics

of energy to a human being as well as other living insects. So, the physical environment is the most important one which cannot be allowed to be damaging now, as it's a matter of our future. Therefore it should be protected for the sake of future generation.

Behavioral risk factors are the next type of environment, where the behavior of people is impacting from the different habits like smoking. As everybody knows, smoking is the key factor to the major types of cancer diseases. According to surgeon general "Cigarette smoking is the leading preventable cause of disease and death in United States". Likewise, physical inactivity is also considered as a behavioral risk factor. A recent surgeon general's report on physical inactivity states that "people who are inactive can improve their health and reduce their risk of developing or dying from heart diseases, diabetes, high blood pressure and colon cancer by becoming even moderately active on a regular basis". Even though alcohol and other drugs also having the predominant role in the health problem, here a healthy diet can be recommended for the purpose of maintaining a good health for people.

As part of this reading on healthcare determinants, the remedies to major issues can be suggested that in general, access to healthcare should be through the ways of getting health insurance for uninsured people, prenatal care to the women in the first trimester or at the beginning of the pregnant period, providing updated

immunizations to the children and the last but not least one is dental care, which is becoming a major issue nowadays.

3. Recent trends in healthcare

From the report of India brand equity foundation (IBEF), a trust established by the department of commerce, under the ministry of commerce and industry, Government of India expressing that "India is the fifth largest employer in healthcare and it is expected to rank amongst the top three healthcare markets in terms of incremental growth by 2020. Recently Indian healthcare sector is coming under the purview of one of the fastest growing industries, which is expected to advance at a compound annual growth rate (CAGR) of 26.31 per cent during 2016-20. It shows an enhanced opportunity is existing and expecting in the healthcare sector".

Presently the income levels of Indian people are rising due to the increased demand of expert labors, "increased population, growing health awareness and changing attitude towards preventive healthcare are the major strong fundamentals of the country, and which is expected to boost healthcare services demand in future" (IBEF).

Advantage of India

The attractive advantage of India in healthcare is the strong demand, attracting opportunities, quality and affordability, and policy support. Where the reason for the strong demand is backed by rising

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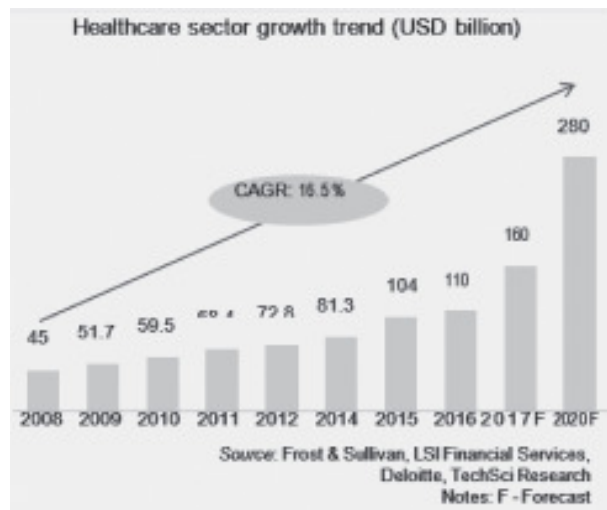
family income, greater health awareness, lifestyle diseases, and increasing access to healthcare insurance. In India, a large number of well trained medical professionals are yearly coming to the platform, so it can improve the quality of healthcare and as compared to the West and other Asian countries, India is more affordable in the cost of high quality. Recent statistics shows that India is the largest exporter of formulations with 14% market share and ranked 12th in the world in terms of export value. This trend indicates the attractive opportunities in investment in healthcare, which leads to the improvements in infrastructure facilities, research and development (R&D), and education etc. as part of the government contribution; they aim to develop India as a global healthcare hub. There are new policies to support the overall operations in healthcare by the way of tax and other incentives. The next advantage is government institutions are providing a

large number of laboratories that are helping to create and develop new drugs and strengthening of further research in medical field. And finally, it is noticed that people are enjoying various benefits from the national health insurance mission developed by the government of India.

New market trends

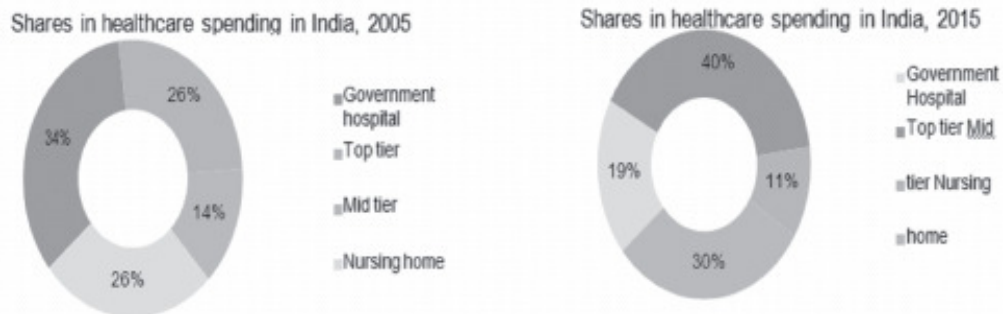
Generally healthcare market is functioning through five major segments. Those are hospitals, pharmaceuticals, diagnostics, medical equipment and suppliers, medical insurances and telemedicine where the hospitals include both government and private hospitals.

By seeing the statistics related to the healthcare from the year 2008 onwards, it is indicating that the healthcare sector is becoming India's largest sector in terms of both revenue and employment.



The above graph shows that the market is expected to make the record of a compound annual growth rate (CAGR) at 16.5 per cent during 2008 to 2020.

Reports from the ministry of health declared that “there are certain initiatives for the development of fifty technologies for the treatment of diseases such as cancer and TB”. As part of improving trend in healthcare, the government is emphasizing on the E-health initiatives like mother-child tracking system (MCTS) and facilitation center (MCTFC).



Source: A report on 'Indian Hospital Services Market Outlook' by consultancy RNCOS, Grant Thornton, LSI Financial Services, OECD, TechSci research

From the above two pie diagrams of the year 2005 and 2015, the trend of Indian people in healthcare spending is clearly mentioned. It is said that now people are more willing to approach top tier hospitals for getting quality results/output. In addition to that presently private sector organizations have the strong potential in India’s healthcare sector. There are large investments happening in private sector, “which comprises around 80 percent of the total market and the total share of private sector in hospitals and hospital beds are estimated at 74 and 40 percent respectively” (Indian hospital service marketing outlook).

Some notable trends are there in the Indian healthcare sector; especially adoption of western culture in food habits as well as the urbanization of the entire modern life is the core reason to the new

types of regular diseases. So this type of life style diseases are replaced instead of traditional health problems of human being. Like high cholesterol, high blood pressure, obesity, poor diet, alcohols are the most life style problems of the current generation. Usually, the demand for treatment and medicines for such types of diseases is increased in the market. That is why the top players (Apollo, AIIMS and Narayana Hrudayalaya) of healthcare market has introduced telemedicine before the public for the convenience of general public. The impact of such telemedicine is it can bridge the rural-urban divide in terms of medical facilities, extending low-cost consultation and diagnosis facilities to the remotest of areas via high-speed internet and telecommunication system. In an overall mobile based health delivery, technological initiatives and luxury

offering are also playing or should play in the success of healthcare sector.

Medical tourism: a growth factor

Now days Instead of adopting allopathic treatment the expert consultants are recommending healthy medical approaches to lifestyle diseases like diabetes. So, traditional treatments like Ayurveda can strive in this sector in mainstream treatment. Because it has lower side effects, lower stress and anxiety, lower blood pressures and cholesterol and ultimately it helps in hormonal balance. And the rich content and tradition of this treatment belong to the Indian culture itself. So it can be one of the best formulas for the healthcare service providers to attract people from abroad as well.

Today the strength of the nation India is, it positioned as a preferred destination for medical tourism and ranked at the top position due to the presence of world class hospitals and skilled medical professionals. High quality in service delivery, low treatment cost compared to other countries is benefitting the Indian medical tourism as a competing one in the global healthcare market. Ministry of health and family welfare reported that treatment cost for major surgeries in India is approximately 20 percent of that in developed countries. Lack of advanced medical facilities in those developed countries leads to traveling of people from abroad to India and India can stand before the world as a king attractive medical

tourism. Especially Ayurveda, yoga, meditation, allopathic and other traditional methods are the major attractive treatments which call people from European nation's Middle East to India.

Conclusion

In healthcare, patients will be happy when the service provider is offering their service at right time in an effective and efficient manner. And there should be equal considerations to each patient in the hearing of their complaints and settlement of the same. Then it is sure that the result will be positive to the organization and it can increase the satisfaction and loyalty among the patients by the way of achieving the majority of different service quality dimensions. Here, patients and their relative's perceptions are playing a major role in the existence of the healthcare service providers in the market. The facts evidenced from the literature are apart from the SERVQUAL instruments have several dimensions which are proved to score positively to the patient's happiness. As part of the suggestions the studies recommend that patients are expecting a more quality approach from the service providers towards the delivery of the services. That is why hospitals and authorities should direct all their efforts to the betterment of equipments and working conditions (for men and materials) to make the organization more attractive that would enhance the quality of services and patient satisfaction in future.

The second discussion was on health determinants that are all affecting the people's way of life. Generally, the question around all the discussion would be, what makes some people healthy and some unhealthy? For such a question, we have covered different factors that can significantly influence the health of the people. Then the next question is how we can create a society where everyone has a chance to live long with a healthy condition. The range of personal, social, economic and environmental factors that influence health status are known as determinants of health and it includes the biological and genetic make-up, individual behavior, social interactions and norms, physical environment, and access to health services. For example stress, discrimination, education, housing, and unemployment are also coming under the different heads of health determinants.

From the different advantages of Indian healthcare sector like increased population and strong demand, quality and affordability, policy support from the

government and attractive opportunities in healthcare investment etc. the country can easily achieve self potential in the healthcare service sector. In healthcare sector, private companies/institutions are emerging as a vibrant force in India. Because of the tough competition in this sector major players are adopting new strategies like cost leadership, differentiation in providing multiple healthcare services, focus on proving one kind of service only, diversified business approaches and the financial strategy of merger and acquisition. Those are expected to improve the operations of the management as well as overall performance of the service providers in both efficient and effective manner. Even though healthcare is becoming an unavoidable sector because of the increased diseases associated with the way a person or group of people live, named lifestyle diseases. It includes atherosclerosis, heart disease, stroke, obesity, diabetes and diseases associated with smoking, alcohol and drug abuse etc.

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