IMPACT OF SERVICE QUALITY ON PATIENT SATISFACTION: A CASE STUDY OF THITSAR SPECIALIST CENTER, YANGON, MYANMAR

A Thesis Presented

by

LAE LAE HTIKE

MASTER OF BUSINESS ADMINISTRATION

(MBA)

SEPTEMBER 2024

IMPACT OF SERVICE QUALITY ON PATIENT SATISFACTION: A CASE STUDY OF THITSAR SPECIALIST CENTER, YANGON, MYANMAR

A Thesis Presented
by
LAI LAI HTIKE

Submitted to the Swiss School of Business Research in partial fulfillment of the requirements for the degree of

MASTER OF BUSINESS ADMINISTRATION
(MBA)

SEPTEMBER 2024

Copyright by LAI LAI HTIKE, 2024

All Rights Reserved

FACTORS INFLUENCING CONSUMER BUYING DECISIONS FOR AWEI METTA HOTEL IN THE POST-COVID ERA IN YANGON, MYANMAR

A Thesis Presented
by
AUNG THEIK

Approved as to style and content by:

_____
U Paing Soe, Chair
President, PSM International College

_____

_____
Daw Myat Myat Oo, Supervisor
Academic Director, PSM International College

Dr. Stephen Harrison
Dean
Swiss School of Business Research

ACKNOWLEDGEMENT

Firstly, I would like to express my deepest gratitude to U Paing Soe, President of PSM International College, Dr. Stephen Harrison, Dean of Swiss School of Business Research for acknowledging me to implement this study.

Secondly, I am heartily grateful to my supervisor, Daw Myat Myat Oo, Academic Director, for her patience guidance, advice, immense knowledge, encouragement and advice she has provided throughout my time as her student in preparing to complete this study successfully. Without her insightful comments, regular feedback and for the hard questions, this study would not have come to a conclusion.

Furthermore, I would to extend my appreciation to all of the professors, associate professors, visiting lecturers, tutors and all the staff of PSM International College who have provided me with any administrative support and strength during academic years.

In addition, I would like to show my gratitude to the respondents coming tonThitsar Specialist Center and all the responsible persons in this organizations for providing data, enormous help that I need for my paper and sharing their valuable time in interviewing. Without their help, the research would not have carried out.

Finally, I would like to appreciate all the persons who contribute in one way or another to my study to the best of their abilities and my friends of SSBR MBA for their support and sharing their knowledge and experience.

Lae Lae Htike

SSBR/2022/MBA011178

ABSTRACT

The healthcare industries are facing many challenges about patients' satisfaction and outcomes due to the rivals of competitors which are local and international cooperate investments. In order to keep competitive advantages, it is necessary to assess the relationship between the service quality and customer's satisfaction. The objective of this study is to assess the service quality dimensions effecting on patients' satisfaction by means of service gap between patients' expectation and perception from the patients' perspective. It is also necessary to understand which service quality dimension mostly impact on patients' satisfaction. This study was conducted in Thitsar Specialist Center which is located in North Dagon township, Yangon division, Myanmar. The target population is patients visiting Thitsar Specialist Center and data are collected from 200 respondents by using simple random sampling method. The data are analyzed by SPSS program by using descriptive statistics of paired-samples T test, correlation analysis, multilinear regression analysis to detect the degree of impact of service quality dimension which are tangibility, reliability, responsiveness, assurance and empathy on only one dependent variable patients' satisfaction. The results showed that Thitsar's customers are not satisfied in some service quality dimensions because the highest gap scores between customer's perceived service and expected service are negative for some questionnaires. Although all service dimensions are significantly related with patients' satisfaction, tangibility and empathy dimension ate the most significant dimensions for patients; satisfaction. This survey result would help Thitsar to improve service quality and customer's satisfaction, and to build customer's loyalty and reputation.

KEY WORDS: service quality, patients' satisfaction, service gap, customer's satisfaction

TABLE OF CONTENTS

CONTENTS Page

LIST OF TABLE

LIST OF TABLES

LIST OF FIGURES

ABBREVIATION

SQ	Service Quality
P	Perceived service
E	Expected Service

CHAPTER I
INTRODUCTION

1.1 Background Information of the Study

The study focuses on Awei Metta Hotel, a five-star hotel in Yangon, Myanmar that targets high-end leisure travelers and emphasizes the domestic market in Myanmar. The COVID-19 pandemic has had a significant impact on the tourism and hospitality industry in Myanmar, leading to reduced demand for travel and loss of revenue (Hesham, F., Riadh, H., & Sihem, N. K., 2021). As a result, consumer behavior in the hotel industry has also changed, with customers becoming more cautious and concerned about any upcoming uncertainty. It is crucial to understand the factors that influence consumer buying decisions in the hotel industry to adapt marketing strategies and attract customers in the post-COVID era. This has caused changes in the marketing channels used by the hospitality sector. The profound alterations induced by the pandemic necessitate a comprehensive understanding of the factors influencing consumer purchasing behavior within the hotel industry. This understanding is imperative for recalibrating marketing strategies and attracting consumers in this novel landscape. The shift has also propelled changes in the marketing channels employed within the hospitality sector, encompassing alternative channels alongside conventional internal, interactive, and external ones (Altinay, L. and Arici, H.E., 2022)

Many hotels and resorts in Myanmar have shifted their focus to the domestic market and have had to adapt their business models to meet changing consumer behavior. Therefore, the management of Awei Metta hotel must understand the consumer buying decision on luxury hotel where the customer's perspective view of buying activities in this uncertain situation in the post-Covid period.

To understand the factors that influence consumer buying decisions for Awei Metta Hotel in the post-COVID era, the case study employs a quantitative research design and surveys a sample of high-end leisure travelers who have recently visited Yangon. The study uses multiple regression analysis to identify the significant factors

that influence consumer buying decisions, including perceived value for money, customer satisfaction, perceived risk, and level of involvement.

1.2 Problem Statement of the Study

The COVID-19 pandemic, an unprecedented global crisis, has wreaked havoc on the tourism and hospitality industry, severely impacting the high-end leisure travel sector. In Myanmar, as in numerous other nations, the pandemic led to the imposition of travel restrictions and the closure of international borders, effectively shutting down a substantial portion of hotels, resorts, and other tourism-related establishments. This resulted in a distressing ripple effect, causing widespread job losses and economic distress across the sector.

In response to this crisis, Awei Metta Hotel, a prestigious luxury five-star establishment nestled in the heart of Yangon, embarked on a strategic pivot. With international travel at a standstill, the hotel recalibrated its focus, turning towards the domestic market and local populations as a means to expand its customer base and foster revenue growth. However, the post-pandemic landscape presents a unique challenge, necessitating a nuanced understanding of consumer purchase behavior in the hospitality domain, particularly within the realm of high-end leisure travel.

Consumer purchase behavior is a complex and multi-dimensional process that involves a range of psychological, social, and situational factors. In the case of Awei Metta Hotel, it is important to identify and analyze the key factors that influence consumer buying decisions, such as perceived value for money (Zeithaml, V. A., 1988), (Dodds, W. B., Monroe, K. B., & Grewal, D., 1991), (Sweeney, J. C., & Soutar, G. N. , 2001), customer satisfaction (Oliver, R. L. , 1980), (Anderson, E. W., Fornell, C., & Lehmann, D. R, 1994), (Mittal, V., Ross, W. T., & Baldasare, P. M., 1998), perceived risk, (Bauer, R. A. , 1960), (Dowling, G. R., & Staelin, R. , 1994), (Sproles, G. B., & Kendall, E. L. , 1986) and level of involvement (Zaichkowsky, J. L. , 1985), (Laurent, G., & Kapferer, J. N., 1985), . By gaining a deeper understanding of these factors, Awei Metta Hotel can develop and implement more effective marketing strategies that are tailored to the needs and preferences of its target customers.

Therefore, the research problem is to identify and analyze the significant factors that influence consumer buying decisions for Awei Metta Hotel in the post-COVID

era in Yangon, Myanmar, in order to develop effective marketing strategies and improve customer satisfaction and loyalty.

1.3 Objective of the Study

The main objective of this study is to focus on.

1) To identify the factors that influence domestic leisure travelers' decision to purchase accommodation at Awei Metta Hotel in the post-COVID era.

2) To examine the impact of demographic factors (e.g., age, gender, income, education) on consumer buying decisions and develop recommendations for C marketing strategies based on the significant factors identified at Awei Metta Hotel in the post-COVID era.

3) To contribute to the body of knowledge on consumer behavior in the hotel industry in the post-COVID era, specifically in the context of domestic leisure travel in Myanmar.

1.4 Research Questions of the Study

1) What factors influence domestic leisure travelers' purchasing decisions for accommodation at Awei Metta Hotel in the post-COVID era in Yangon, Myanmar?
2) How do these factors relate to perceived value for money, customer satisfaction, perceived risk, and level of involvement at Awei Metta Hotel in the post-COVID era in Yangon, Myanmar?
3) Additionally, how do demographic factors (such as age, gender, income, and education) affect these purchasing decisions at Awei Metta Hotel in the post-COVID era in Yangon, Myanmar?
4) What marketing strategies can Awei Metta Hotel develop to cater to the needs and preferences of domestic leisure travelers in Myanmar?

1.5 Scope and Limitation of the Study

The primary objective of this research endeavor is to unravel the intricacies of domestic customers' buying behavior within the context of Awei Metta Hotel, situated in Yangon, Myanmar. The study seeks not only to comprehend the nuances of consumer decision-making but also to propose actionable strategies that can effectively allure and sustain these customers. A comprehensive mixed-methods

approach will be employed, encompassing both face-to-face interviews and a structured survey, to yield a comprehensive panorama of insights from both prospective and existing customers.

However, it is imperative to acknowledge certain limitations that inherently accompany such an explorative study. Foremost among these limitations is the specificity of the focus on Awei Metta Hotel, which might not serve as an all-encompassing representation of the entire gamut of hotels in Yangon, Myanmar. The unique characteristics, offerings, and positioning of Awei Metta Hotel could potentially introduce a bias into the findings, rendering the generalization of results to other establishments less tenable.

Furthermore, the very nature of the high-end market segment that Awei Metta Hotel caters to could impose constraints on the sample size. The luxury niche might inherently have a limited customer base, leading to challenges in garnering a substantial number of responses. This limitation could impact the comprehensiveness and robustness of the findings, necessitating a cautious interpretation of the results.

An additional facet to consider is the reliance on self-reported data, which inherently carries the risk of biases and social desirability effects. Respondents might alter their responses to align with perceived societal norms or exhibit recall biases, potentially distorting the true nature of their behaviors and preferences. It is thus essential to interpret the results while being cognizant of these potential distortions.

Another constraint arises from the time-bound nature of the study. The research's scope might limit its ability to predict the long-term ramifications of the ongoing pandemic on both the hospitality industry and consumer behavior. The evolving nature of the situation, with dynamics that might transcend the study's timeline, could potentially affect the generalizability and applicability of the findings in a post-pandemic landscape.

However, the research design has been carefully crafted to mitigate these limitations and capitalize on opportunities. As COVID-19 restrictions have eased, the study's scope has been expanded, providing an enriched canvas for investigating consumer behavior. The inclusion of face-to-face interviews augments the depth of insights, fostering a more profound understanding of the nuances that underlie consumers' choices and preferences.

Moreover, the research's pertinence has been magnified in light of the pandemic's enduring influence on consumer behavior. The study seeks to unpack the ways in which the pandemic has transformed buying behavior and the hospitality landscape, thereby enriching the relevance and timeliness of the findings. It aims not only to illuminate the immediate implications but also to delineate strategies that Awei Metta Hotel can adopt to recalibrate its marketing approaches and amplify service quality, ensuring its resilience and competitiveness in the post-COVID era.

In summation, the study, while accompanied by certain constraints, is designed to navigate these limitations strategically. Its pursuit of understanding domestic customers' buying behavior within the premises of Awei Metta Hotel is both exploratory and relevant, with the intention to shape actionable insights that could empower the hotel to flourish even amid the intricate intricacies of a dynamically evolving landscape.

1.6 Organization of the study

This thesis consists of five chapters. Chapter 1 is the introduction of the study that includes food service, specific industrial background, problem statement of the study, objectives of the coffee industry study, research question and scope and limitation of the study. And then, organization of the study is also described. Chapter 2 is literature review of the study. It consists concept of service management, service characteristics, service quality, dimensions of service quality, customer satisfaction, relationship between service quality and customer satisfaction, findings from previous studies and conceptual framework of the study. Chapter 3 is methodology that includes research method, research design, questionnaires development, sampling size, data collection methods and additionally ethical consideration. Chapter 4 is the result of data analysis. Finally, chapter-5 is findings, recommendation and conclusion of the study.

CHAPTER II
LITERATURE REVIEW

2.1 Introduction

Healthcare is the major concern among human basic needs. The word 'health' refers to a state of complete emotional, mental, and physical well-being. Healthcare exists to help people stay well in these key areas of life (Felman, 2020). Quality health care can be defined in many ways but there is growing acknowledgement that quality health services should be:

- **Effective** – providing evidence-based healthcare services to those who need them;
- **Safe** – avoiding harm to people for whom the care is intended; and
- **People-centred** – providing care that responds to individual preferences, needs and values. (WHO, 2024)

Since health is the fundamental issue for human society, healthcare service, far from other service industries, needs the quality care assessment.

2.2 Theoretical Concepts and Principles

2.2.1 Service Quality

Providing service represents the process of doing matters instead of clients. Service is an economic activity involving time, place, space, and psychological benefits to satisfy consumers' needs without material characteristic (Othman & Yao, 2014). As this nature of service, quality become the vital role to finish the client's matters. Quality is a multidimensional concept, meaning different things to different people, ranging the degree of comfort. Service quality is the process grading to meet the client's needs, expectation and satisfaction. In the ideal service environment, we do not want to just meet the customers' needs, we want to "delight" the customer (Babu, 2012). Thus, the degree of service quality can be measured with the level of customer satisfaction. The role of service quality is widely recognized as being a critical determinant for the success and survival of an organization in today's competitive environment (Zaim, Bayyurt , & Zaim, 2010).

2.2.2 Patient Satisfaction

Satisfaction means the feeling of pleasure, resulting from outcome of a process, comparing with the expectation before the process. Conversely, when someone's expectation exceeds the process outcome, dissatisfaction may be occurred. Relating this concept, customer satisfaction may be defined as a determinant that gauges how happy customers are with a company's products and services after consumption.

For healthcare industries, the client's satisfaction is more serious because the customers, called patients, have already been discomfort about their physically or mentally. Patients carry certain expectations before their visit and the resultant satisfaction or dissatisfaction is the outcome of their actual experience (Andrabi, Shamila, Jabeen, & Fazli, 2015). Sajid and Baig (2007) mentioned that the satisfaction of the patients is of prime importance to quantify the competency of any health system worldwide (Sajid & Baig,, 2007).

2.2.3 Relationship between Service Quality and Patient Satisfaction

Human satisfaction is not a simple concept because of factors relating lifestyle, past experiences, future expectations and the norms of his/her life. For a patient, satisfaction may be his/her emotion and perception of delivered healthcare services.

Depending on patients' characteristics such as good knowledge, social strata, education level, age difference, experience, income and expectations and so on, patients' satisfactions are multidimensional. However. since patients are service consumers, quality care services are the vital role to get patients satisfaction.

Most patients will be satisfied when they feel well and comfortable about their physiological and psychological disorders. To get this outcome, both technical SQ and functional SQ will be qualify. The success or failure of any healthcare service depends on the satisfaction met by the patients on various services offered. Thus, service quality measurement became major determinants for assessing patient satisfaction.

2.2.4 Service Quality Measurement

The service quality of healthcare can be expressed as clinical or technological quality and process or functional quality, where the former was based on how accurate the diagnosis and procedures are, and only healthcare professionals will understand. The functional quality is how the healthcare services are delivered to the patients. As the clinical quality is difficult to be evaluated by the patients who lack knowledge for medical or clinical proficiency, assessment of process quality by the patients became an efficient way to be carried out (Min, 2020)

As mentioned above, the technical quality of healthcare service cannot be assessed accurately from patient' view. So functional quality measurement became major indicators for assessing healthcare service quality from customers' side. There are several studies to assess functional healthcare SQ. Since healthcare industry is one of the most complicated service delivery systems and patients have heterogenous views on perceived services, there are some barriers while patient-centered services are provided. In order to understand various factors affecting patient satisfaction, researchers have explored various service quality dimensions considered by patients when evaluating health care quality. But, the difference between patients' perception and patients' expectation on this service quality is the major determinant in order to meet patient satisfaction.

Their satisfactions come from their expectations which meet their perceptions on service delivery provided from healthcare center. And thus, marketers have to find answers about which factors can influence their satisfaction and what are their expectations. If expectations are not in accordance with the actual perceived services, it will occur a gap.

2.2.5 A Conceptual model of service quality in Health care

To identify the differences between the patient expectations and perceived service, the Gap model of service quality proposed by Parasuraman .et al (1985) addresses five gaps which are the knowledge gap, policy gap, delivery gap, communication gap, and perception gap. Each gap defines the discrepancy

between the expectations of the customer and the actual product or service quality (Çıtak, 2024).

(i) Knowledge gap- The difference in understanding between service provider and the patient's expectations. This gap will take place when the healthcare manager doesn't have enough information what the patients want and expect.

(ii) Policy gap - The misalignment between the healthcare provider's perception on patient expectations and the healthcare service standard policies and specifications

Healthcare managers may understand what their patients expect from their service but they haven't established the necessary training or standards to meet these expectations (Team, 2023).

(iii) Delivery gap - The variance between specified service quality and the actual service delivery. This gap may arise when the actual service result did not meet the established service standards.

(iv) Communication gap - The discrepancy between what the service provider communicates about its services and the actual service delivery. This gap will occur When the healthcare mangers did not provide the service as they promised before.

(v) Perception gap - The difference between expected service and experienced service. This gap may appear when the patient's perception of the delivered service differs from their initial expectations.

Among these five gaps, the first fours are the service provider's side and the later is the result of former gaps. Thus, the fifth gap, otherwise customer gap, became the indicator for service quality evaluation which is numerically defined as SERVQUAL

2.2.6 SERVQUAL MODEL

Although there are many dimensions to gauge patient satisfaction, SERVQUAL model developed by Parasuraman et al., (1985) measures the service quality as a gap between a customer's expectations of service and the customer's perceptions of the service delivered. Service quality is difficult to measure due to its characteristics include intangibility, heterogeneity and inseparability. According to SERVQUAL model, the level of service quality can be raised by reducing the gap between patient expectation on service and actual perceived service. Originally, by means of interview and focus groups, Parasuraman developed a model of 10

dimensions, namely tangibles, reliability, responsiveness, competency, courtesy, assurance, credibility, security, access, and understanding. Later in 1988, Parasuraman et al. reduced these ten dimensions into five dimensions (Al-Damen, 2017). The SERVQUAL tools which measure the service quality gaps are tangibility, reliability, responsiveness, assurance and empathy.

2.3 Variables of the Study

SERVQUAL (service quality) model is one of the widely used models to measure quality in service areas because of its comprehensiveness and practical applicability (Lee & Kim, 2017). The concept of patient satisfaction is multidimensional, and reflects patient perceptions and expectations compared to the actual care they receive (Edlund, Young, Kung,, Sherbourne, & Wells, 2003). SERVQUAL dimensions are the indicators for the comparation mentioned above. Patient Satisfaction can be measured according to the level of SERVQUAL variables.

2.3.1 Tangibles

Tangibles indicate to the environmental factors where the service is delivered. Tangibles surveys involves physical facilities, personal appearance, instruments and technical equipment utilized to deliver the services, also the modern facilities like signage, availability of resources, accessibility, convenience, spaciousness, cleanness (Padma, Rajendran, & Sai, 2009). It is important whether patients who visit the healthcare center get the proper service, related to tangibles dimension. Patient satisfaction may vary with the tangible service.

2.3.2 Reliability

Reliability represents healthcare providers' ability to perform the promised service dependably and accurately (Christia, Ard, & Runion, Before and After Corrective Strategy Implementation, 2021). Reliability of the service means that the patients are seen when they require a service and that they receive the treatment to be correct for their disease (Rashid, Mansor , & Hamzah, 2011).

2.3.3 Responsiveness

Responsiveness can be expressed as the quality of a reaction, especially quick or positive one. Responsiveness measurement is used to gauges how promptly healthcare providers respond to patient needs and inquiries. This dimension relates with willingness of healthcare providers to help patient.

2.3.4 Assurance

Assurance means the competence, courtesy, and trustworthiness of healthcare staff. Actually, this tool represents the patients' perception of confidence in respective providers' ability to establish trust and acceptability. Thus, the assurance means build the best interests at heart of the customers (Al-Daoar & Zubair, 2018).

2.3.5 Empathy

The word 'Empathy' means deeply understanding of individual's feelings and caring with attention. For healthcare industry, empathy become the essential component to meet competitive advantage because every patient desire to get specific attention. Empathy relates to individualized attention, care and emotional support to each patient. Moreover, healthcare staff can demonstrate their caring attitude toward patients, calling them by their preferred names, listening their diagnosis history and other social information.

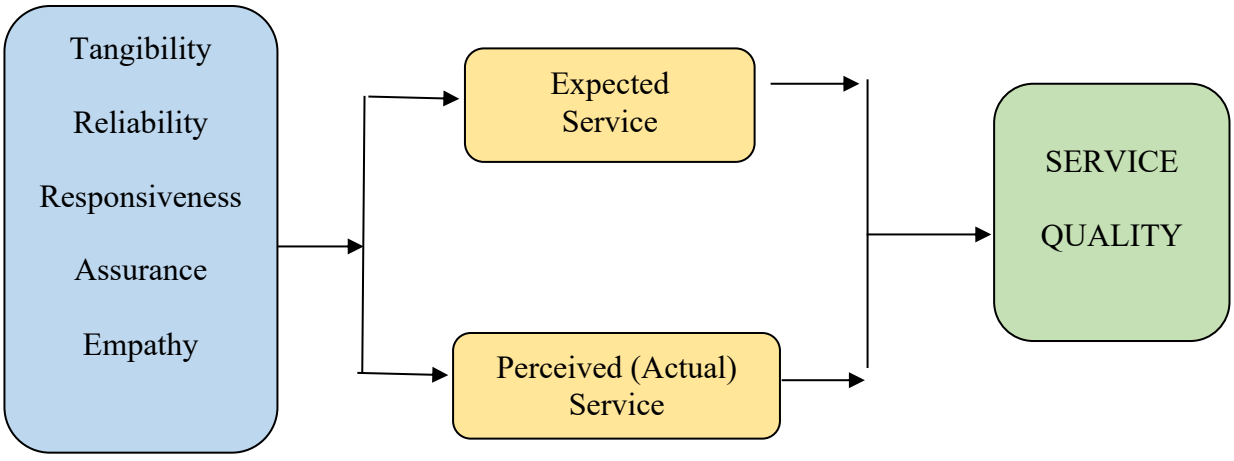

Figure 2.1 SERQUAL MODEL

2.4 Review of Empirical Studies

Mon Myat Min (2020) conducted a survey in Myanmar by using the framework of SERVQUAL variables and collected the 204 patients in Thingangyun Sanpya General Hospital which occupied 500 beds in Yangon. The researcher found that all the SERQUAL dimensions, tangible, reliability, responsiveness, assurance and empathy, have a positive relationship to customer's satisfaction.

Ei Mon Mon , the researcher conducted in Chan Myae Myitta hospital , showed that only tangibility, reliability and responsiveness have positive impact with patients' satisfaction but the other two (Empathy and assurance) do not influence positively the patients satisfaction of
Chan Myae Myitta hospital which located in Thanlyin District, Myanmar (Mon, 2019).

The research finding on service quality dimensions conducted by Ali Al-Daoar showed that the reliability and responsiveness have the highest impact on the patient's satisfaction, but the tangible, assurance and empathy were not significantly affected on the patient's satisfaction in Yemeni private hospitals located in Ibb city (Al-Daoar & Zubair, 2018).

The research using SERVQUAL dimensions conducted by Raed Mohammed Baba et al. aimed to measure the impact of health service quality dimensions on customer satisfaction in Jordan governmental hospitals. The results revealed a strongly evidence to accept the existence relationship between all of SERVQUAL dimensions of health services and customer satisfaction (Baba, Aburahmeh, & Elrasheed, 2017)

The next study conducted in Turkey by Uzun (2001) found that the quality of services were below the expectations of the patients. The negative SERVQUAL gap score for each of the five SERVQUAL dimensions indicate a need for overall improvement in service quality. (Uzun, 2001)

The results of numerous studies conducted on the relationship between service quality and customer satisfaction show that higher quality of service will lead to higher satisfaction. (Cronin Jr., Brady, & Hult, 2000)

2.5 Research Hypothesis

According to the above theoretical foundation, hypothesis can be developed as follows:

H1: There is a significant relationship between tangibles and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar.

H2: There is a significant relationship between reliability and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar

H3: There is a significant relationship between responsiveness and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar

H4: There is a significant relationship between assurance and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar

H4: There is a significant relationship between empathy and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar.

2.6 Conceptual Framework of The Study

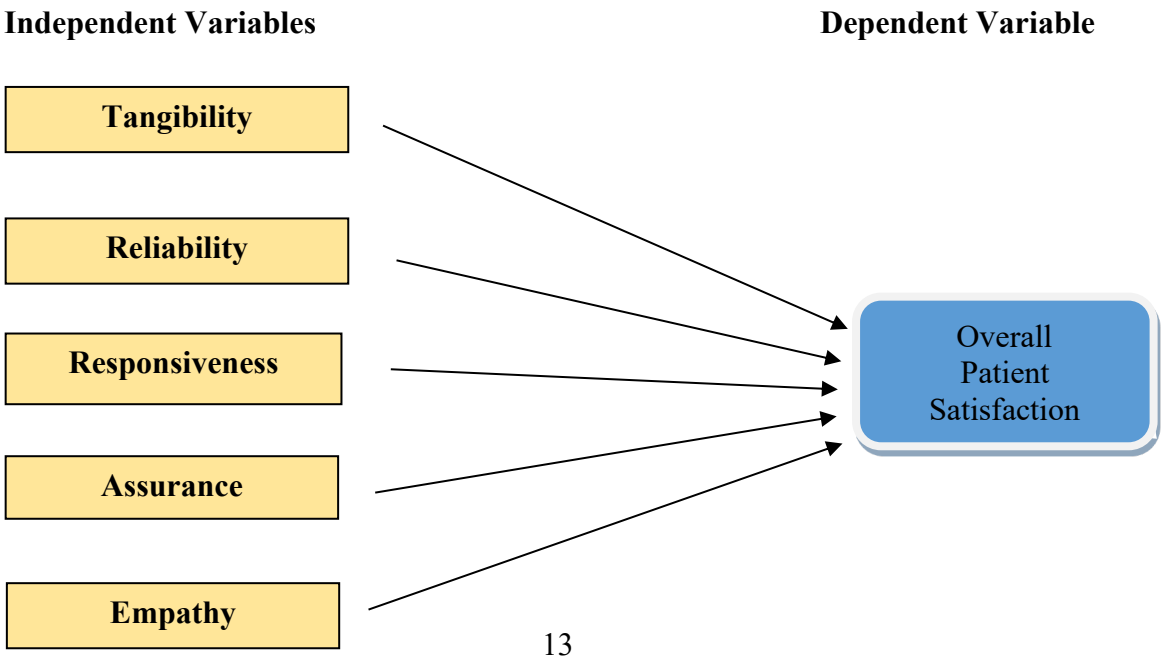

Figure 2.2 Research Framework on the relationship between service quality and patient satisfaction of THITSAR SPECIALIST CENTER (SERVQUAL MODEL)

CHAPTER III
METHODOLOGY

This chapter is about to explain research methods that included how data will be collected from the respondents, how the questionnaires are developed and sample selection and analysis of data. The chapter also includes survey design, limitations of survey and procedures of the study. The chapter ends with the quality criteria and ethical consideration of the data.

3.1 Research Design

This paper will measure the service quality of Thitsar Specialist Center, one of the private healthcare industries in North Dagon township, Yangon by using SERVQUAL methods. In order to get the result of service quality, the researcher also gauges the patients' expectations before taking the medical services and the patients' perception after receiving these medical services. The descriptive quantitative method will be used to identify the gap level of expected service quality and perceived service quality. By using SERVQUAL instrument with some modification of the words for the application of healthcare center, a self-administered questionnaire was developed and used to collect data from the patients who visit to Thitsar Specialist Center during the month of May, 2024.

3.2 Sample Selection

The population for this research is the patients and their attendants who visit Thitsar Specialist Center to utilize 24-hour OPD services from Monday to Sunday during 1st May, 2024 to 30th May, 2024. The researcher distributed the questionnaires in OPD department, reception and the cashier from which customers can take them by themselves and fill them up or these questionnaires are delivered to the customers by the help of the nurse aid. The age of respondents is standardized 16 years and above for all genders because respondents at this age are mature enough to answer questions independently. The respondents excluded were those who were seriously ill, not self-

sufficient elderly people and unwilling customers to participate in this study. Ultimately, the study populations included 1350 respondents that are not only patients but also their family, friends and other relatives who come to Thitsar healthcare center in a month.

The sample size for this research is calculated by using Taro Yamane (Yamane, 1973) formula. A 95% confidence interval and 5% level of precision are assumed for sample size calculation.

$$N = \frac{N}{1+N(e^2)}$$

Where, n is the required sample size,

$$n = \frac{1350}{1+ 1350(0.05)^2}$$

$$= 308$$

So, the required sample size is 308 participants.

3.3 Data Collection

The researcher has used two sources for data collection; primary data and secondary data. For collection the later data source, the literatures reviews and the previous studies of various researchers listed in Wikipedia, Research Gate, Google Scholar etc and also paper documents. To collect the primary data, simple random sampling technique was used and the structured questionnaires were distributed to the respondents who came to take the healthcare service of Thitsar Specialist Center during May, 2024.

Firstly, the researcher has asked for the official permission to conduct the survey from the top management level of Thitsar Specialist Center. After receiving the approval of management team, simple random sampling was carried out to collect data from the patients and their attendants. When the questionnaires were distributed to the respondents, the researcher has already explained them that the purpose of that survey is to find the factors that influence the service improvement of Thitsar Specialist Center and has no other purpose, of course.

The questionnaire is designed into two separate questionnaires to be answered by the same patients. It consists of two parts and each part is made up of two sections. The former part contains the demographic data of participants and likert scale of five-point ranging from 1 (strongly disagree) to 5 (strongly agree) involves five dimensions of service quality with thirty items. This part was classified as the expectations version of the SERVQUAL questionnaire and it was given to the participants while waiting for their turns to purchase healthcare services.

The second part of questionnaire included the perceptions version of SERVQUAL and questions regarding patient satisfaction. After the participants have seen doctors or got the required services, the researcher approached the respondents again and asked for their participation to complete the second part of the research questionnaires.

The questionnaire was written in English, but it was translated into local language, Myanmar, before distribution to respondents for avoiding their misunderstanding. Using the questionnaire, data was gathered from 308 participants and 200 useable questionnaires were returned with a response rate of 65% which was considered satisfactory for subsequent analysis.

Key ethical issues in conducting research are informed consent, confidentiality and respect for privacy. Among them, confidentiality of the information is important in that the information obtained will not be reached outside (Mon, 2019). Therefore, the researcher took great care of questionnaires security and then the answer documents changed and saved as an excel file in its own computer.

3.4 Data Analysis

Resultant data were analyzed by the Statistical Package for Social Science (SPSS) software, version 26. The SERVQUAL score was measured to evaluate patient expectation and perception on healthcare service with respect to the following dimensions: tangibility, reliability, responsiveness, assurance, and empathy. The gap level of each service dimension was obtained by subtracting the expected service score from the perceived service scores.

$$\mathbf{SQ = P - E}$$

Where, SQ = Service Quality

P = Patient Perception after taking the service

E = Patient Expectation before getting the service

The positive scores represent that patients' perceptions are greater than their expectations on healthcare service, and means that healthcare center gets patient satisfaction on its services. The negative scores indicate that patients' expectations have not met their perceptions and leads to patients' dissatisfaction. As a result, they can conclude that healthcare services are poor.

The next chapter will show the findings of analysis about the demographic variable, analysis of patient expectation and perception on service quality. Regression analysis will be used to examine the relationship between multiple independent variables which are the five service dimensions and one dependent variable that is patients' satisfaction, and to find out the outcome of independent variables and patient satisfaction on Thitsar Specialist Center.

CHAPTER IV
ANALYSIS AND RESULT

This chapter is data analysis of Thitsar Specialist Center to examine the patient satisfaction related to the SERVQUAL dimensions.

4.1 Demographic Profiles

Table 4.1 Gender Analysis

Issue		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Male	88	44.0	44.0	44.0
	Female	112	56.0	56.0	100.0
	Total	200	100.0	100.0	

Table 4.1 shows the distribution of the sample according to gender among two hundred questionnaires. It shows that the majority of the samples are females which can be represent the percentage of 56 and the males are 44% of the total respondents in this study.

Table 4.2 Age Analysis

Issue		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Under 20	32	16.0	16.0	16.0
	20-29 Years	54	27.0	27.0	43.0
	30-39 Years	41	20.5	20.5	63.5
	40-49 Years	39	19.5	19.5	83.0
	50 and above	34	17.0	17.0	100.0
	Total	200	100.0	100.0	

Table 4.2 represents the age distribution of samples in the study. The table shows that the majority of samples is age interval of 20-29 years and they are 27 % of

the samples (54 respondents). The second responsive group of this survey is the group of age interval 30-39 years and its percent is 20.5 (41 respondents). The third position is age interval 40-49 years group whose proportion is 19.5% (39 respondents). Group of age interval 50 and above follows the fourth position with 17 percent (34 respondents). The least percentage group is under 20 years and it is only 16% (32 respondents).

Table 4.3 Analysis of Education Status

Issue		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	up to High School	107	53.5	53.5	53.5
	Undergraduate	29	14.5	14.5	68.0
	Graduate	55	27.5	27.5	95.5
	Master Degree	6	3.0	3.0	98.5
	PhD Degree	3	1.5	1.5	100.0
	Total	200	100.0	100.0	

According to the level of education, the majority of respondents concludes up to high school level group and the percentage is 53.5% (107 participants). The second highest percentage group is Graduate level group which has 55 respondents. Undergraduate level stands for third position with 14.5% (29 participants), follow by the level of Master degree group (3%) which has only 6 participants. The least percentage score is 1.5% and belongs to PhD degree group.

Table 4.4 Analysis of Occupational Level

Issue		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Employer	11	5.5	5.5	5.5
	Employee	105	52.5	52.5	58.0
	Self-employee	37	18.5	18.5	76.5
	Un-employee	22	11.0	11.0	87.5
	Student	25	12.5	12.5	100.0
	Total	200	100.0	100.0	

The table illustrates the distribution of sample according to their occupational nature and it can be detected that employee group is the highest participants group with percentage of 52.5% (105 participants). The proportion of self-employee is 18.5% and this is the second largest group in sample distribution. The third highest proportion represents student group and its percent score is 12.5% (25 respondents), follow by un-employee group of percentage 11(22 respondents). The lowest ratio in sample distribution indicates Employer group and related percentage is 5.5% (11 respondents).

Table 4.5 Analysis of Average Income Level per month

Issue		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	Under 300,000kyats	118	59.0	59.0	59.0
	300,001-500,000kyats	41	20.5	20.5	79.5
	500,001-700,000kyats	22	11.0	11.0	90.5
	700,001-900,000kyats	10	5.0	5.0	95.5
	Above 900,000 kyats	9	4.5	4.5	100.0
	Total	200	100.0	100.0	

From the above table, the highest percentage of samples arranging the level of income is 59% and it is the group of respondents whose household income are below 300,000kyats. The income level of (300,001-500,000) kyats ranking the second highest percentage group possess 20.5%, follow by the groups (500,001-700,000) kyats and (700,001-900,000) kyats income level which percentage are 11% and 5% respectively. The minority of samples distribution according to income level is the group which has the average income level of above 900,000kyats.

Table 4.6 Visit Frequency Analysis

Issue		Frequency	Percent	Valid Percent	Cumulative Percent
Valid	1st time	65	32.5	32.5	32.5
	2nd time	40	20.0	20.0	52.5
	3rd time	31	15.5	15.5	68.0
	4th time and above	64	32.0	32.0	100.0
	Total	200	100.0	100.0	

The table shows that the patients who have come to the specialist center only one time are regarded as the major responsive group of percentage 32.5%. The regular customers who have come to healthcare center four time and above stand second highest ratio of percentage 32% (64 respondents). The 2nd time and 3rd time visit customers group also responded the questionnaires by the percentage of 20% and 15% respectively.

4.2 Descriptive Analysis of Variables

When the researcher prepared questionnaires, independent variables and dependent variable are weighed by using 5 Likert scales which are strongly disagree, disagree, moderate, agree and strongly agree. Thus, the service quality factors (both expectation and perception) will be analyzed by mean and standard deviation.

4.2.1 Customers' expectation and perception analysis of Thitsar Specialist Center

Table 4.7 Customers' Expectation on Thitsar's Services

Questions	Min	Max	Mean	Ranking
The equipment are up-to-date things	1	5	3.95	15
The waiting Area is wide and pleasant.	1	5	3.55	21
Healthcare center has clean and hygiene environment.	1	5	3.62	20
The 24-hour water, electricity and security systems are safe and comfortable.	1	5	4.06	7
Information can be got easily by means of pamphlets, business card and social media platform.	3	5	4.19	2
The healthcare providers and staff are neat and tidy in appearance.	1	5	4.14	5
The healthcare providers can perform the services as promised.	1	5	4.05	8
The staff are ready for all time to answer the patients' inquiry and requests.	1	5	3.94	16
Laboratory tests and X ray services are delivered punctually.	1	5	4.09	6
The doctors are punctual at all times.	1	5	3.91	18
The doctors usually spent enough time to consult the patients about possible treatment options.	1	5	4.17	3
The doctors are expert in their respective subjects.	1	5	4.17	3
Healthcare center can give accurate bills for the services.	1	5	3.81	19
Healthcare providers always offer prompt services.	1	5	3.99	11
Waiting hours for services are acceptable.	1	5	3.91	18
Healthcare providers always inform the patients clearly which services will be performed.	1	5	4.02	10
Healthcare providers always offer prompt services.	2	5	3.96	14
Waiting hours for services are acceptable.	1	5	3.97	13

Healthcare providers always inform the patients clearly which services will be performed.	1	5	4.21	1
Patients trust the doctors' expertise and skills.	2	5	4.16	4
Staff can do their task without mistakes.	1	5	4.04	9
Staff are skillful and knowledgeable to solve the patients' problems.	1	5	4.06	7
X rays and Laboratory reports are accurate and believable.	1	5	3.98	12
Feel secure in using the services of healthcare center.	2	5	4.19	2
Doctors and nurses have individualized attention to patients.	1	5	3.94	16
Doctors and nurses provide the patients with their ultimate care.	1	5	3.93	17
Nurses are polite and friendly dealing with patients or patients' family.	1	5	3.95	15
Staff are able to provide personal care services to the patients.	1	5	4.06	7
Healthcare center always prioritizes the recovery of patient's health.	1	5	3.99	11
The leaders of healthcare center also give personal attention to the patients.	1	5	4.16	4

Table 4.7 shows the ranking of customers' expectation on Thitsar's service before they do not take the medical service while waiting their turns. The customers expect most that the healthcare providers including doctors will inform them clearly about the service performed. The respondents also expect to feel security in receiving the services of healthcare center. They also expect that the healthcare center will support its information in order to search it easily. The respondents surely expect the doctors to be skillful and expert in their subjects and their expectation is at superior level about the doctors' consultation time for their treatment options. The least expectation of respondents is about the waiting area. They do not expect much

whether the environment of healthcare center is clean or not. They also expect less about the accurate bills. Their expectations are high about the doctor's treatment for their health problems rather than other facilities of healthcare center such as waiting area, billing system and environment condition.

Table 4.8 Customers' Perception on Thitsar's Services

Questions	Min	Max	Mean	Ranking
The equipment are up-to-date things	1	5	3.89	19
The waiting Area is wide and pleasant.	1	5	3.29	22
Healthcare center has clean and hygiene environment.	1	5	3.94	18
The 24-hour water, electricity and security systems are safe and comfortable.	1	5	4.08	10
Information can be got easily by means of pamphlets, business card and social media platform.	1	5	4.05	12
The healthcare providers and staff are neat and tidy in appearance.	1	5	4.16	5
The healthcare providers can perform the services as promised.	1	5	4.21	4
The staff are ready for all time to answer the patients' inquiry and requests.	1	5	4.05	12
Laboratory tests and X ray services are delivered punctually.	1	5	4.12	7
The doctors are punctual at all times.	1	5	3.45	21
The doctors usually spent enough time to consult the patients about possible treatment options.	1	5	4.21	4
The doctors are expert in their respective subjects.	1	5	4.25	2
Healthcare center can give accurate bills for the services.	1	5	4.01	16
Healthcare providers always offer prompt services.	1	5	3.89	19
Waiting hours for services are acceptable.	1	5	3.64	20
Healthcare providers always inform the patients clearly which services will be performed.	1	5	4.09	9
Healthcare providers always offer prompt services.	1	5	4.03	14
Waiting hours for services are acceptable.	1	5	4.15	6
Healthcare providers always inform the patients clearly which services will be performed.	2	5	4.26	1

Patients trust the doctors' expertise and skills.	1	5	4.26	1
Staff can do their task without mistakes.	1	5	4.07	11
Staff are skillful and knowledgeable to solve the patients' problems.	1	5	4.08	10
X rays and Laboratory reports are accurate and believable.	2	5	4.10	9
Feel secure in using the services of healthcare center.	1	5	4.24	3
Doctors and nurses have individualized attention to patients.	1	5	4.11	8
Doctors and nurses provide the patients with their ultimate care.	1	5	3.99	17
Nurses are polite and friendly dealing with patients or patients' family.	1	5	4.04	13
Staff are able to provide personal care services to the patients.	1	5	4.26	1
Healthcare center always prioritizes the recovery of patient's health.	1	5	4.10	9
The leaders of healthcare center also give personal attention to the patients.	1	5	4.02	15

Table 4.8 describes the ranking of customers' perception on Thitsar's service after they have received the medical service. The highest result about the respondents' perception concern with their beliefs on doctors' skill and staff's activities of personal care. Moreover, they perceived as like as they expected about healthcare providers' service by giving information the patients clearly which services will be performed. They also feel secure in using the services of healthcare center. They experienced that the doctors usually spent enough time to consult the patients about possible treatment options. The customer have known the fact that the healthcare providers can perform the services as promised after they have taken the healthcare services. They also perceived that the healthcare does not have enough waiting area as they expected.

In addition, the respondents perceived that the doctors are not punctual and they spent much waiting hour to take healthcare services. Therefore, they think waiting hours for services are not acceptable. Consequently, the customers would not like to accept that healthcare providers always offer prompt services. They also think that the healthcare center do not provide up-to-date equipment, instruments and machine.

4.2.2 The Gap-model Analysis of Service Quality Expectation and Service Quality Perception

The mean scores of each questionnaire and mean gap score difference between the
service quality expectations and service quality perceptions of Thitsar Specialist Center are shown in following table,

Table 4.9 Analysis of Service Quality Expectation, Perception and the Gap

Dimensions and items	Mean Perception Score	Mean Expectation Score	Mean Gap Score
Tangible	**3.90**	**3.92**	**-0.02**
The equipment are up-to-date things	3.89	3.95	-0.06
The waiting Area is wide and pleasant.	3.29	3.55	-0.26
Healthcare center has clean and hygiene environment.	3.94	3.62	0.32
The 24-hour water, electricity and security systems are safe and comfortable.	4.08	4.06	0.02
Information can be got easily by means of pamphlets, business card and social media platform.	4.05	4.19	-0.14
The healthcare providers and staff are neat and tidy in appearance.	4.16	4.14	0.02
Reliability	**4.04**	**4.02**	**0.02**
The healthcare providers can perform the services as promised.	4.21	4.05	0.16
The staff are ready for all time to answer the patients' inquiry and requests.	4.05	3.94	0.11
Laboratory tests and X ray services are delivered punctually.	4.12	4.09	0.03

The doctors are punctual at all times.	3.45	3.91	-0.46
The doctors usually spent enough time to consult the patients about possible treatment options.	4.21	4.17	0.04
The doctors are expert in their respective subjects.	4.25	4.17	0.08
Healthcare center can give accurate bills for the services.	4.01	3.81	0.20
Responsiveness	**4.01**	**4.01**	**0.00**
Healthcare providers always offer prompt services.	3.89	3.99	-0.10
Waiting hours for services are acceptable.	3.64	3.91	-0.27
Healthcare providers always inform the patients clearly which services will be performed.	4.09	4.02	0.07
Staff don't hesitate to serve the patients' needs and requests.	4.03	3.96	0.07
Doctors and nurse provide prompt response to patients' problems and complaints	4.15	3.97	0.18
The instructions for medication, prescriptions and follow up plan are clear and easy to understand.	4.26	4.21	0.05
Assurance	**4.15**	**4.09**	**0.06**
Patients trust the doctors' expertise and skills.	4.26	4.16	0.1
Staff can do their task without mistakes.	4.07	4.04	0.03
Staff are skillful and knowledgeable to solve the patients' problems.	4.08	4.06	0.02
X rays and Laboratory reports are accurate and believable.	4.10	3.98	0.12
Feel secure in using the services of healthcare center.	4.24	4.19	0.05

Empathy	**4.09**	**4.01**	**0.08**
Doctors and nurses have individualized attention to patients.	4.11	3.94	0.17
Doctors and nurses provide the patients with their ultimate care.	3.99	3.93	0.06
Nurses are polite and friendly dealing with patients or patients' family.	4.04	3.95	0.09
Staff are able to provide personal care services to the patients.	4.26	4.06	0.2
Healthcare center always prioritizes the recovery of patient's health.	4.10	3.99	0.11
The leaders of healthcare center also give personal attention to the patients.	4.02	4.16	-0.14

Table (4.9) illustrates the descriptive statistics of the expectation from patients and attendants before visiting the Thitsar Specialist Center for their required treatments, the perception from them after they have been encountered the service from specialist center and the gap between these two variables.

For the tangibility axis, the mean score for expectation is 3.92, that for perception is 3.9and the difference score is 0.02. The minus sign means that the healthcare center cannot provide the tangible facilities such as medical equipment, building and spacing, electricity, information and 24-hour services system, cleanliness and waiting area do not meet the customer expectation.

For the reliability axis, the mean expected score is 4.02 and the actual perceived mean score is 4.04. The difference of these two score is also 0.02. But the perception score is slightly higher than the expectation score, it can be said that the customers have got the satisfaction about healthcare services. For the responsiveness dimension, the expected mean score from the patients is 4.01 and that of perception is also 4.01. Generally, it means that the patients have experienced the healthcare services as they expected.

The mean result about the assurance factor can be detected as a satisfaction for customers. The expected mean score is 4.09, the actual perceived mean score is 4.15 and the difference score is 0.06. Since the patients' perception is higher than patients' expectation score, it means that the patients satisfy doctors' skills, abilities of nurses and other staff, result of X ray and reports of laboratory.

As the result for Empathy dimension, the mean score of perception is 4.09 and patients excepted mean score is 4.01. The result score 0.08 can be reflected patients are satisfied about overall empathy service dimension.

4.2.2 Analysis of Highest Mean Score from Customer Expected version

Table 4.10 Arrangement of five Highest Mean scores of Expectation from clients

No	Service Quality Survey Questionnaires	Mean Score of Customer Expectation	Dimension Factor
19	The instructions for medication, prescriptions and follow up plan are clear and easy to understand.	4.21	Responsiveness
5	Information can be got easily by means of pamphlets, business card and social media platform.	4.19	Tangibility
11	The doctors usually spent enough time to consult the patients about possible treatment options.	4.17	Reliability
12	The doctors are expert in their respective subjects.	4.17	Reliability
30	The leaders of healthcare center also give personal attention to the patients.	4.16	Empathy
20	Patients trust the doctors' expertise and skills.	4.16	Assurance
6	The healthcare providers and staff are neat and tidy in appearance.	4.14	Tangibility

Table 4.8 demonstrates that questionnaire no (19) is the highest mean score of customer expectation which is from Responsiveness factor. The customer expected that the healthcare provider will give effort to explain them how to take medication and when will they come back again for their continuous treatments. For the question (5) which are second highest expectation mean score, the customers think the information about the services such as the doctors' schedules, medical checkout package and seasonal promotion plans can easily be found on social media and other platforms. Due to the result of above table, the patients believe the doctors' skill and profession and they expect the doctors to provide consultation for their future treatments. The fourth highest mean scores for customer expectation are from empathy and assurance factors. Patients want to get personal attention not from the doctors but from the founder and administrators of healthcare center. For the fifth highest expectation, the customers think that the healthcare providers and staff are smart and tidy due to their professional.

4.2.3 Analysis of Highest Mean Score from Customer Perceived version

Table 4.11 Arrangement of five Highest Mean scores of Perception from clients

No	Service Quality Survey Questionnaires	Mean Score of Customer Perception	Dimension Factor
19	The instructions for medication, prescriptions and follow up plan are clear and easy to understand.	4.26	Responsiveness
20	Patients trust the doctors' expertise and skills.	4.26	Assurance
28	Staff are able to provide personal care services to the patients.	4.26	Empathy
12	The doctors are expert in their respective subjects.	4.25	Reliability
24	Feel secure in using the services of healthcare center.	4.24	Assurance

7	The healthcare providers can perform the services as promised.	4.21	Reliability
11	The doctors usually spent enough time to consult the patients about possible treatment options.	4.21	Reliability
18	Doctors and nurse also provide prompt response to patients' problems and complaints	4.15	Responsiveness

The table illustrates that the question number (19), (10) and (28) stand for the highest mean score of customer perception and they are concerned with responsiveness, assurance and empathy factor, respectively. For question (19), the customers perceived the highest service as they expected. The second highest mean score is for question number (12) which belongs to reliability factor. For this question, the customers encountered the doctors' expertise and therefore they trust the doctors' skills.

The question number (24) ranking the third highest mean score is the assurance factor. Since the customers felt safety for healthcare services, they decided to purchase next services from Thitsar. The two questions (7) and (11) represent the fourth highest mean scores and both are concerned with reliability factor. The fifth highest mean score is the responsiveness question of number (18). The patients perceived fast actions about their health problems and inconvenience and it is the most important factor to build brand in healthcare industry.

4.2.4 Analysis of Lowest Mean Score from Customer Expected version

Table 4.12 Arrangement of five Lowest mean scores of Expectation on clients

No	Service Quality Survey Questionnaires	Mean Score of Customer Expectation	Dimension Factor
2	The waiting Area is wide and pleasant.	3.55	Tangibility
3	Healthcare center has clean and hygiene	3.62	Tangibility

	environment.		
13	Healthcare center can give accurate bills for the services.	3.81	Reliability
10	The doctors are punctual at all times.	3.91	Reliability
15	Waiting hours for services are acceptable.	3.91	Responsiveness
26	Doctors and nurses provide the patients with their ultimate care.	3.93	Empathy

From the above table, question (2) stands for the lowest mean score for patients' expectation. It can be seen patients assumed that it is not important for them whether the waiting area is wide and pleasant or not. For the second lowest score, the patients have the same assumption as the highest score and they are rarely interested in cleanliness and hygiene environment of healthcare center.

For the third lowest score, the patients have less concern about billing process than other important procedures for their health. About the fourth lowest score, waiting hours for doctors and other treatment are also not important if they will get suitable treatments from their desired doctors. In accordance with the fifth lowest expectation, the patients less expect the ultimate care of doctors and nurse because human resources of healthcare providers are less proportion to the population percent in Myanmar, even in private sector.

4.2.5 Analysis of Lowest Mean Score from Customer Perceived version

Table 4.13 Arrangement of five lowest mean scores of Perception from clients

No	**Service Quality Survey Questionnaires**	**Mean Score of Customer Expectation**	**Dimension Factor**
2	The waiting Area is wide and pleasant.	3.29	Tangible
10	The doctors are punctual at all times.	3.45	Reliability
15	Waiting hours for services are acceptable.	3.64	Responsiveness
1	The equipment are up-to-date things	3.89	Tangible
14	Healthcare providers always offer prompt	3.89	Responsiveness

	services.		
3	Healthcare center has clean and hygiene environment.	3.94	Tangible

From the table, it can be regarded that question number (2) is the major concern for its lowest mean score and it concern with tangible factor. It means that the waiting area for patients does not reach even their expectation level. The second lowest mean score stands for question (10) related to reliability factor and that for question number (15) relates with responsiveness factor. It is expressed that patients experienced the services and doctors' treatment after they have spent a long time at the healthcare center. The question number (1) and (14) represent the fourth lowest mean scores which are the tangible and responsiveness factors respectively. They think the equipment used in healthcare center are not up -to -date to meet their satisfaction level. Like that, the healthcare providers do not offer prompt services as their expectation. The least mean score of perceptions represents question (3) which is concerned with tangible factor. The patients get less satisfactions about healthcare center's environment.

4.2.6 Analysis of Highest Gap Score for Customer's expectation

It means that the customers met least result for which they have expected the most. Conversely, the customer's expectation exceeds their actual experience and it leads to customer's dissatisfaction.

Table 4.14 Ranking of Highest Gap Score for Customer's expectation

No	**Service Quality**	**Mean Perception Score**	**Mean Expectation Score**	**Mean Gap Score**	**Factor**
10	The doctors are punctual at all times.	3.45	3.91	-0.46	Reliability
15	Waiting hours for services are acceptable.	3.64	3.91	-0.27	Responsive -ness
2	The waiting Area is wide	3.29	3.55	-0.26	Tangibility

	and pleasant.				
30	The leaders of healthcare center also give personal attention to the patients.	4.02	4.16	-0.14	Empathy
5	Information can be got easily by means of pamphlets, business card and social media platform.	4.05	4.19	-0.14	Tangibility
14	Healthcare providers always offer prompt services.	3.89	3.99	-0.10	Responsive-ness

4.2.7 Findings

According to table 4.12, all the gap scores show negative sign and it can interpret that the customers did not get the satisfactory outcomes concerned with the above service quality items. The highest gap score is found in question 'the doctors are punctual at all time'. The mean expectation from respondents is 3.91 and the respondents' perception mean score is 3.45, resulting the gap score of 0.46. It means that the patients experienced less comfort in purchasing healthcare services because, sometime the doctors cannot reach the right time and the patients spent much waiting time. So, it gives the patients' dissatisfaction.

The second highest gap score question relates with the former question and gives the same result. The third highest gap score concerns with the tangibility factor and question is "The waiting Area is wide and pleasant." Their expected score for this question is 3.55 but their perception is 3.29. It means that patients feel dissatisfy for waiting area although they did not much expect for this. The questions (5) and (30) give the fourth highest gap score. The question (5) is "Information can be got easily by means of pamphlets, business card and social media platform." It shows that the patients cannot get the information of Thitsar Specialist Center easily.

The next question "The leaders of healthcare center also give personal attention to the patients." It can demonstrate that the administrators of Thitsar specialist center

lacked to provide patient-centered care by themselves. Since there are many rivals in private healthcare sectors, the patients have many alternatives to make purchase decision. Thus, the above item will be one of the factors for customers to choose service options. To get positive result, the administrators
must take care and give the personal attention to the patients. Another highest gap score question is "Healthcare providers always offer prompt services." The expected mean score from respondents is 3.99 while the actual perceived mean score is 3.89. The service quality received from the healthcare center does not reach to their expectation and that the customers think that they spent much time because of delay services.

Table 4.15 Descriptive Statistics of perceived service quality

	Mean	**Std. Deviation**	**N**
Tangible	3.8992	1.03146	200
Reliability	4.0414	0.94821	200
Responsiveness	4.0075	1.00297	200
Assurance	4.1500	0.88215	200
Empathy	4.0842	0.93642	200
Satisfaction	4.0133	0.96438	200

4.2.8 Reliability Test

To test the reliability, the researcher will use Cronbach's alpha, which is used to measure the internal reliability coefficient. All questionnaires in this survey showed the value exceeded a threshold of 0.70, which represents a good reliability score.

Table 4.16 Reliability Statistics

Cronbach's Alpha	N of items
0.997	33

4.2.9 Analysis of Service Quality in terms of Paired Sample T-test

The Paired-Samples T test is the procedure which compares the means of two variables for a single group.

The below table represents the strength of the relationship between two continuous variables, expectation and perception about tangibility factor. Due to the result of correlation value which is greater than 0.7, it can be said that the correlation is strong enough.

Table 4.17 Paired Samples Correlations (Tangible)

	N	Correlation	Sig
Tangible (1) expectation- Tangible (1) perception	200	.954	.000
Tangible (2) expectation- Tangible (2) perception	200	.945	.000
Tangible (3) expectation- Tangible (3) perception	200	.926	.000
Tangible (4) expectation- Tangible (4) perception	200	.973	.000
Tangible (5) expectation- Tangible (5) perception	200	.893	.000
Tangible (6) expectation- Tangible (6) perception	200	.976	.000

Table 4.18 Paired sample T-test of Customer's perception and expectation on Tangibility Factor

		Paired Differences					t	df	Sig (2-tailed)
		Mean	Std. Deviation	Std Error Mean	95% Confidence Interval of the difference				
					Lower	Upper			
Pair 1	Tangible (1) The equipment are up-to-date things. Tangible (1) expectation- Tangible (1) perception	.065	.348	.025	.016	.114	2.638	199	.009
Pair 2	Tangible (2) The waiting Area is wide and pleasant. Tangible (2) expectation- Tangible (2) perception	.260	.440	.031	.199	.321	8.362	199	.000
Pair 3	Tangible (3) Healthcare center has clean and hygiene environment. Tangible (3) expectation- Tangible (3) perception	-.315	.466	.033	-.380	-.250	-9.566	199	.000
Pair 4	Tangible (4) The 24-hour water, electricity and security systems are safe and comfortable Tangible (4) expectation- Tangible (4) perception	-.020	.245	.017	-.054	.014	-1.156	199	.249

Table 4.19 Paired sample T-test of Customer's perception and expectation on Tangibility Factor (cont.)

		Paired Differences					t	df	Sig (2-tailed)
		Mean	Std. Deviation	Std Error Mean	95% Confidence Interval of the difference				
					Lower	Upper			
Pair 5	Tangible (5) Information can be got easily by means of pamphlets, business card and social media platform. Tangible (5) expectation- Tangible (5) perception	.140	.512	.036	.069	.211	3.870	199	.000
Pair 6	Tangible (6) The healthcare providers and staff are neat and tidy in appearance. Tangible (6) expectation- Tangible (6) perception	-.010	.200	.014	-.038	.018	-.706	199	.481

The above table represents the paired samples t-test for the perceived and expected service quality provided by Thitsar Specialist Center.

According the results, all p value, except pair number (4) and (6), are higher than the significant level of 0.05, it can be said that there is no statistically significant difference between the expected service quality of the respondents before visiting healthcare center and after receiving healthcare treatment. For the tangible factor (4) The 24-hour water, electricity and security systems are safe and comfortable, and tangible factor (6) The healthcare providers and staff are neat and tidy in appearance, P value are greater than 0.05. Moreover, the confidence intervals of these two factors included zero, it can be said that there is not a statistically significant difference

between expected service quality of pretreatment and posttreatment of healthcare center and accept the null hypothesis.

Table 4.20 Paired Samples Correlations (Reliability)

	N	Correlation	Sig
Reliability (1) expectation- Reliability (1) perception	200	.937	.000
Reliability (2) expectation- Reliability (2) perception	200	.939	.000
Reliability (3) expectation- Reliability (3) perception	200	.977	.000
Reliability (4) expectation- Reliability (4) perception	200	.924	.000
Reliability (5) expectation- Reliability (5) perception	200	.957	.000
Reliability (6) expectation- Reliability (6) perception	200	.953	.000
Reliability (7) expectation- Reliability (7) perception	200	.950	.000

From the above table, the strength of the relationship between two continuous variables, expectation and perception about reliability factor, is strong due to the values of correlation which exceed 0.9.

Table 4.21 Paired sample T-test of Customer's perception and expectation on Reliability Factor

		Paired Differences					t	df	Sig (2-tailed)
		Mean	Std. Deviation	Std Error Mean	95% Confidence Interval of the difference				
					Lower	Upper			
Pair 1	Reliability (1) The healthcare providers can perform the services as promised. Reliability (1) expectation-	-.155	.363	.026	-.206	-.104	-6.042	199	.000

	Reliability (1) perception								
Pair 2	Reliability (2) The staff are ready to answer the patients' inquiry and requests. Reliability (2) expectation- Reliability (2) perception	-.115	.350	.025	-.164	-.066	-4.649	199	.000
Pair 3	Reliability (3) Laboratory tests and X ray services are delivered punctually. Reliability (3) expectation- Reliability (3) perception	-.030	.198	.014	-.058	-.002	-2.140	199	.034
Pair 4	Reliability (4) The doctors are punctual at all times. Reliability (4) expectation- Reliability (4) perception	.455	.499	.035	.385	.525	12.889	199	.000

Table 4.22 Paired sample T-test of Customer's perception and expectation on Reliability Factor (cont.)

		Paired Differences					**t**	**df**	**Sig (2-tailed)**
		Mean	**Std. Deviation**	**Std Error Mean**	**95% Confidence Interval of the difference**				
					Lower	**Upper**			
Pair 5	Reliability (5) The doctors spent enough time to consult the patients about possible treatment options. Reliability (5) expectation- Reliability (5) perception	-.035	.290	.021	-.075	.005	-1.706	199	.090

Pair 6	Reliability (6) The doctors are expert in their respective subjects. Reliability (6) expectation- Reliability (6) perception	-.085	.280	.020	-.124	-.046	-4.300	199	.000
Pair 7	Reliability (7) Healthcare center can give accurate bills for the services. Reliability (7) expectation- Reliability (7) perception	-.190	.393	.028	-.245	-.135	-6.832	199	.000

From the above table, only the reliability factor number (5) has higher value than 0.05, and therefore there is no statistically significant difference between the expectation and perception about the factor that the doctors spent enough time to consult the patients about possible treatment options. The rest of other reliability factors which p values are smaller

than 0.05, also excluded zero in their confidence intervals. Thus, it is typically considered to be statistically significant, in which case, the null hypothesis should be rejected.

Table 4.23 Paired Samples Correlations (Responsiveness)

	N	**Correlation**	**Sig**
Responsiveness (1) expectation - Responsiveness (1) perception	200	.959	.000
Responsiveness (2) expectation - Responsiveness (2) perception	200	.932	.000
Responsiveness (3) expectation - Responsiveness (3) perception	200	.945	.000

Responsiveness (4) expectation - Responsiveness (4) perception	200	.908	.000
Responsiveness (5) expectation - Responsiveness (5) perception	200	.939	.000
Responsiveness (6) expectation - Responsiveness (6) perception	200	.970	.000

The correlation values are nearly 1 and therefore the correlation strength of the expectation and perception variables on responsiveness factors can bae easily detected.

Table 4.24 Paired sample T-test of Customer's perception and expectation on Responsiveness Factor

		Paired Differences					**t**	**df**	**Sig (2-tailed)**
		Mean	**Std. Deviation**	**Std Error Mean**	**95% Confidence Interval of the difference**				
					Lower	**Upper**			
Pair 1	Responsiveness (1) Healthcare providers always offer prompt services Responsiveness (1) expectation-Responsiveness (1) perception	0.105	.323	.023	0.060	0.150	4.594	199	.000
Pair 2	Responsiveness (2) The waiting hours for services are acceptable. Responsiveness (2) expectation-Responsiveness (2) perception	0.270	.488	.035	0.202	0.338	7.822	199	.000
Pair 3	Responsiveness (3) Healthcare provider inform the patients clearly which service will be performed. Responsiveness (3) expectation-Responsiveness (3) perception	-0.070	.325	.023	-0.115	-0.025	-3.046	199	.003
Pair 4	Responsiveness (4) Staff don't hesitate to serve the patients' needs and request. Responsiveness (4) expectation-Responsiveness (4) perception	-0.070	.443	.031	-0.132	-0.008	-2.236	199	.026

Table 4.25 Paired sample T-test of Customer's perception and expectation on Responsiveness Factor (cont.)

		Paired Differences					t	df	Sig (2-tailed)
		Mean	Std. Deviation	Std Error Mean	95% Confidence Interval of the difference				
					Lower	Upper			
Pair 5	Responsiveness (5) Doctors and nurse provide prompt response to patients' problems and complaints. Responsiveness (5) exp: - Responsiveness (5) per:	-.175	.381	.027	-.228	-.122	-6.497	199	.000
Pair 6	Responsiveness (6) The instructions for medication, prescriptions and follow up plan are clear and easy to understand. Responsiveness (6) exp: - Responsiveness (6) per:	-.050	.218	.015	-.080	-.020	-3.236	199	.001

The paired samples t-test about the responsiveness factor showed that the differences between expected services and actual perceived services are statistically significant because all the pair values are greater than the significant level of 0.05 and the 95% confidence interval of the differences all exclude zero.

Table 4.26 Paired Samples Correlations (Assurance)

	N	Correlation	Sig
Assurance (1) expectation- Assurance (1) perception	200	.871	.000
Assurance (2) expectation- Assurance (2) perception	200	.950	.000
Assurance (3) expectation- Assurance (3) perception	200	.984	.000
Assurance (4) expectation- Assurance (4) perception	200	.951	.000
Assurance (5) - Assurance (5) perception	200	.895	.000

According correlation table, it will be easily seen that the associations between independent variables for assurance dimension is strong.

Table 4.27 Paired sample T-test of Customer's perception and expectation on Assurance Factor

		Paired Differences					t	df	Sig (2-tailed)
		Mean	Std. Deviation	Std Error Mean	95% Confidence Interval of the difference				
					Lower	Upper			
Pair 1	Assurance (1) Patients trust the doctors' expertise and skills. Assurance (1) expectation-Assurance (1) perception	-.105	.418	.030	-.163	-.047	-3.551	199	.000
Pair 2	Assurance (2) Staff can do their task without mistakes. Assurance (2) expectation-Assurance (2) perception	-.040	.298	.021	-.082	.002	-1.898	199	.059
Pair 3	Assurance (3) Staff are skillful and knowledgeable to solve the patients' problems. Assurance (3) expectation-Assurance (3) perception	-.010	.173	.012	-.034	.014	-.816	199	.416
Pair 4	Assurance (4) X rays and Laboratory reports are accurate and believable. Assurance (4) expectation-Assurance (4) perception	-.115	.320	.023	-.160	-.070	-5.085	199	.000
Pair 5	Assurance (5) Feel secure in using the services of healthcare center Assurance (5) expectation-Assurance (5) perception	-.250	.446	.032	-.312	-.188	-7.936	199	.000

According the paired samples test results, all p values, except pair number (2) and (3), are higher than the significant level of 0.05, it can be said that there is no statistically significant difference between the expected service quality of the respondents before visiting healthcare center and after receiving healthcare treatment. For the assurance dimension (2) Staff can do their task without mistakes, and assurance dimension (3) Staff are skillful and knowledgeable to solve the patients' problems, P value are 0.059 and 0.416 which are greater than 5% significant level. Conversely, the confidence intervals of these two factors included zero, it can be said that there is not a statistically significant difference between expected service quality of pretreatment and posttreatment of healthcare center and accept the null hypothesis.

Table 4.28 Paired Samples Correlations (Empathy)

	N	**Correlation**	**Sig**
Empathy (1) expectation- Empathy (1) perception	200	.934	.000
Empathy (2) expectation- Empathy (2) perception	200	.969	.000
Empathy (3) expectation- Empathy (3) perception	200	.950	.000
Empathy (4) expectation- Empathy (4) perception	200	.927	.000
Empathy (5) expectation- Empathy (5) perception	200	.932	.000
Empathy (6) expectation- Empathy (6) perception	200	.931	.000

The correlation between the independent variables which describes how related they are to each other is strongly associated in Empathy dimension, with the greater correlation coefficients.

Table 4.29 Paired sample T-test of Customer's perception and expectation on Empathy Factor

		Paired Differences					t	df	Sig (2-tailed)
		Mean	Std. Deviation	Std Error Mean	95% Confidence Interval of the difference				
					Lower	Upper			
Pair 1	Empathy (1) Doctors and nurses have individualized attention to patients. Empathy (1) expectation- Empathy (1) perception	-.170	.377	.027	-.223	-.117	-6.384	199	.000
Pair 2	Empathy (2) Doctors and nurses provide the patients with their ultimate care. Empathy (2) expectation- Empathy (2) perception	-.060	.277	.020	-.099	-.021	-3.062	199	.003
Pair 3	Empathy (3) Nurses are polite and friendly dealing with patients or patients' family. Empathy (3) expectation- Empathy (3) perception	-.085	.344	.024	-.133	-.037	-3.494	199	.001
Pair 4	Empathy (4) Staff are able to provide personal care services to the patients. Empathy (4) expectation- Empathy (4) perception	-.205	.405	.029	.261	.149	-7.163	199	.000

		Paired Differences					t	df	Sig (2-tailed)
		Mean	Std. Deviation	Mean	95% Std Error Confidence Interval of the difference				
					Lower	Upper			
Pair 5	Empathy (5) Healthcare center always prioritizes the recovery of patient's health. Empathy (5) expectation- Empathy (5) perception	-.105	.367	.026	-.156	-.056	-4.047	199	.000
Pair 6	Empathy (6) The leaders of healthcare center also give personal attention to the patients. Empathy (6) expectation- Empathy (6) perception	.150	.358	.025	.100	.200	5.926	199	.000

Since all the pair value are higher than the significant level of 0.05 and 95% Confidence Intervals of the differences do not include zero, it can be said that there are significant differences at 5% level between the expected service quality of the respondents before getting the services and perceived service quality of the respondents after they are receiving the service from the healthcare center.

4.3 Linear Regression Analysis

The regression will be applied to measure a strength of relationship between the independent variables and dependent variable. In this study, the researcher would like to find how much strengths are there in the relation between five independent variables, Servqual dimensions, and the only one dependent variable, patient satisfaction. Therefore, multiple regression method is used and the data from perception sides are applied to make linear regression analysis.

To detect the associations among the independent variables, and the associations between the independent variables and the dependent variable, correlation analysis has to be conducted first.

Table 4.30 Correlations between Each Variable

		Tangible	Reliability	Responsive -ness	Assurance	Empathy	Patient satisfaction
Tangible	**Pearson correlation**	1					
	Sig. (2-tailed)						
	N	200					
Reliability	**Pearson correlation**	.990**	1				
	Sig. (2-tailed)	.000					
	N	200	200				
Responsive -ness	**Pearson correlation**	.993**	.995**	1			
	Sig. (2-tailed)	.000	.000	.			
	N	200	200	200			
Assurance	**Pearson correlation**	.979**	.990**	.988**	1		
	Sig. (2-tailed)	.000	.000	.000.			
	N	200	200	200	200		
Empathy	**Pearson correlation**	.989**	.994**	.993**	.989**	1	
	Sig. (2-tailed)	.000	.000	.000.	.000		
	N	200	200	200	200	200	

Table 4.31 Correlations between Each Variable (cont.)

		Tangible	Reliability	Responsive -ness	Assurance	Empathy	Patient satisfaction
Patient Satisfaction	**Pearson correlation**	.992**	.988**	.990**	.982**	.991**	1
	Sig.(2-tailed)	.000	.000	.000.	.000	.000	
	N	200	200	200	200	200	200

** Correlation is significant at the 0.01 level (2-tailed)

Correlation analysis is a primarily concerned with the observation whether there is a relationship between variables. If there exists a relationship, the magnitude and direction of that relationship can be reflected from this analysis. In correlation analysis, the values of multiple correlation coefficients (R) must be ranged between -1 and +1. The value of +1 can be regarded as a perfect positive association and -1 can be described as a perfect negative association. The zero value can be expressed that there is no association between variables.

From the table 4.31, the Pearson correlation between variables shows the strongly associations each other at 1% significant level because r values of all dimensions are above 0.7 and nearly closed to 1.

According correlation analysis, it supported the research hypothesis;

H1: There is a significant relationship between tangibles and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar.

H2: There is a significant relationship between reliability and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar

H3: There is a significant relationship between responsiveness and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar

H4: There is a significant relationship between assurance and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynmar

H5: There is a significant relationship between empathy and patient satisfaction of Thitsar Specialist Center in North Dagon, Yangon, Mynma

Table 4.32 Model Summary for multiple linear regressions

Model	R	R Square	Adjusted R Square
1	.994[a]	.989	.988

Table 4.33 ANOVA table for multiple linear regression

ANOVA[a]						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	183.000	5	36.600	3421.348	.000[b]
	Residual	2.075	194	.011		
	Total	185.076	199			
a. Dependent Variable: AVGpAITENTSATIS						
b. Predictors: (Constant), AVGEMPATHY, AVGTANGIBILITY, AVGASSURANCE, AVGTRELIABILITY, AVGTRESPON						

Table 4.34 The coefficients table for multiple linear regression

Coefficients[a]						
Model		Unstandardized Coefficients		Standardized Coefficients	t	Sig.
		B	Std. Error	Beta		
1	(Constant)	.099	.049		2.008	.046
	AVGTANGIBILITY	.482	.063	.515	7.683	.000
	AVGTRELIABILITY	-.235	.094	-.231	-2.496	.013
	AVGTRESPON	.114	.093	.118	1.227	.221
	AVGASSURANCE	.092	.064	.084	1.447	.149
	AVGEMPATHY	.526	.085	.511	6.167	.000
a. Dependent Variable: AVGpAITENTSATIS						

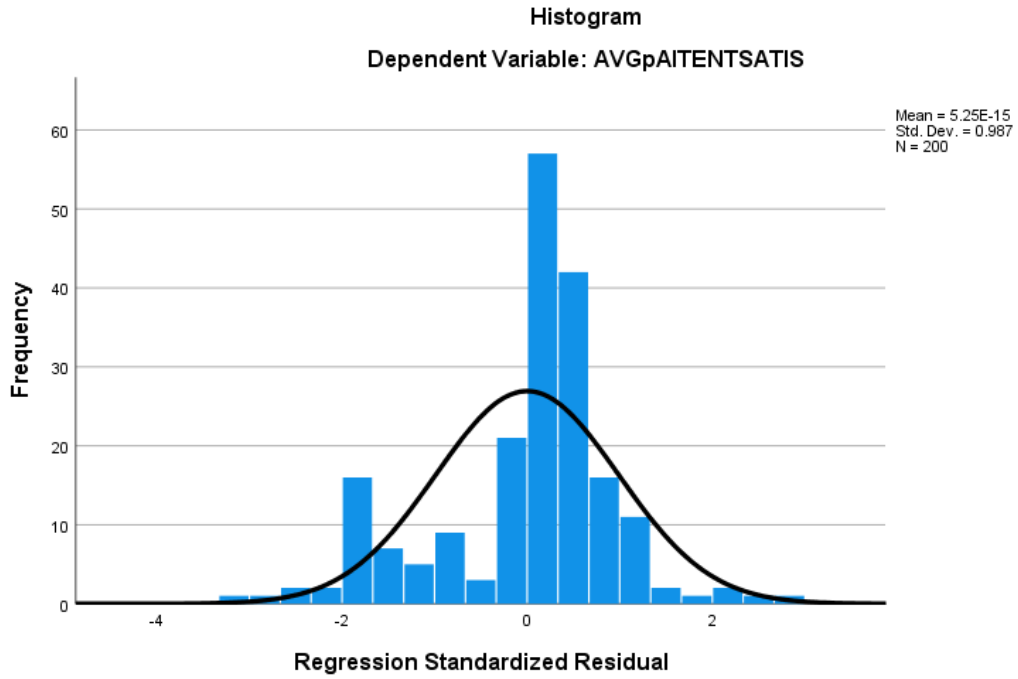

Figure 4.1 Histrogram for regression analysis

Figure 4.2 Scatterplot for regression

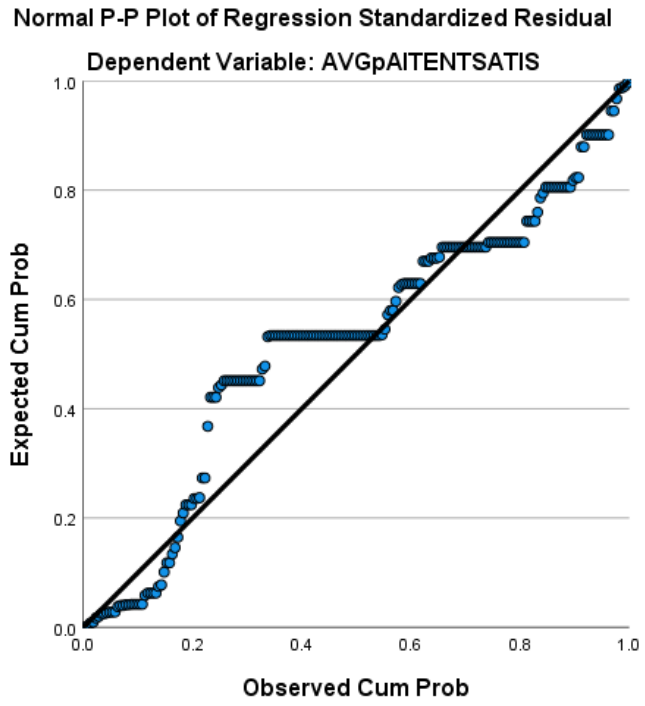

Figure 4.3 Normal P-P Plot

4.4 Multiple Regression Analysis of Patient's Satisfaction on Service Quality

According to ANOVA table, larger F -value of 3421.348 indicates the regression model is better and indicates a greater difference between the group means. P value is 0.000 which is less than 0.05(5% significant level) and shows that the null hypothesis can be rejected.

In the study of table 4.28, the dimensions of service quality - the independent variables, patient satisfaction - the dependent variable and analysis is discussed as follows:

Dependent variable which is patients' satisfaction is regarded as (Y)

Independent variables are

1. Tangible (X1)
2. Reliability (X2)
3. Responsiveness (X3)
4. Assurance (X4)
5. Empathy (X5)

By using multiple linear regression analysis, the coefficient of the multiple regression R value is 0.994 can be expressed the association between the current values and the expected values of the patients' satisfaction and the R value of 0.994 shows that there is a very strong and positive relationship between the five dimensions of service quality (independent variables) and patients' satisfaction (dependent variables).

The value of R Square 0.989 shows that this model can explained the data by 98.9%, and the value of R square is significant at the level of five percentage.

The multiple regression equation:

$$Y = 0.099 + 0.482\ X1 - 0.235\ X2 + 0.114\ X3 + 0.092\ X4 + 0.526\ X5$$

According to the value of unstandardized coefficients (Beta), the Empathy dimension showed the highest value (0.526) and positive sign among other dimensions. Empathy factor has significant number of 0.000 which is less than 0.05 when the other dimensions as stationary. This indicates that the Empathy dimension

has a statistically significant at 5% level and it impacts on patient's satisfaction and direction of relationship is positive.

The coefficient of tangibility dimension(X1) also reached the second highest value (0.482) and showed positive sign, resulting a statistically significant at 95% confidence level and it also impacts on dependent factor when the other dimensions as constant. The coefficient of reliability dimension (X2) is 0.235 and the coefficient value is not significant at the level of five percentage (5%) which represents that patient satisfaction is negatively influenced by the reliability dimension while the other dimensions as constant.

The coefficient of responsiveness dimension (X3) is 0.114 and the coefficient value is not significant at the level of five percentage (5%) which indicates that the responsiveness dimension positively influenced the patient satisfaction, when the other dimensions as constant. The coefficient of assurance dimension (X4) is 0.092 and the coefficient value is not significant at the level of five percentage (5%) which shows the positive influence of assurance on patient satisfaction.

Comparing with the standardized coefficient, tangibility (0.515) is the most important dimension to influence the patient satisfaction, followed by empathy factor (0.511) because tangibility and empathy included both physical and mental issue what the patient looking for.

The next chapter will be the evaluation and recommendation about the research result obtained.

CHAPTER V

CONCLUDION, DISCUSSION AND RECOMMENTATIONS

The objective of this research is to evaluate of the service quality gap between the expected services and the actual outcomes using the SERVQUAL tools in the context of a private healthcare center in Myanmar, named Thitsar Specialist Center which is located in North Dagon, Yangon city. The discussion of the study to answer the stated problems and research objectives is described by using the Gap model, Correlation Analysis and Multiple Linear Regression Analysis. Moreover, the recommendations to the findings and suggestion for further study based on this research are also stated in this chapter.

5.1 Summary of findings

This research intends the observation of patients' satisfaction which related to service quality dimension. Thus, this observation also depends more or less on the condition of patients' feelings conducted at this moment and demographic data. From 200 respondents,

88 respondents are males and 112 respondents represent females. The highest frequency of respondents in terms of age interval is 20-29 years which accounted for 27% of respondents.

It can be assumed that this age interval is usually unnecessary to purchase healthcare services, so they may be the respondents of patients' attendants.

From the factor of educational level, the highest frequency of respondents is below or equal to high school level which counted for 53.5%. It is essential to note that even patients and attendants with low education levels also rely on private healthcare center to get satisfaction and attention. From household income level side, the highest income group is under 300,000 MMK per month is the majority which counted for 59%, related to occupational level of general worker and employee. According to Demographic data, the majority of respondents are people who are

low educational level and income. But which factors stimulate them to come this healthcare

center and it may be one of the factors to detect the service quality provided by Thitsar Specialist Center.

5.1.1 Investigation on Expected service quality and Perceived service quality

Firstly, the researcher presents the customer expectation on service quality of Thitsar Specialist Center ranking the five highest mean scores.

Table 5.1 Top Five Highest Expectation results

Ranking	Questions	Service Factors
1	The instructions for medication, prescriptions and follow up plan are clear and easy to understand.	Responsiveness
2	Information can be got easily by means of pamphlets, business card and social media platform.	Tangibility
3	The doctors usually spent enough time to consult the patients about possible treatment options.	Reliability
3	The doctors are expert in their respective subjects.	Reliability
4	The leaders of healthcare center also give personal attention to the patients.	Empathy
4	Patients trust the doctors' expertise and skills.	Assurance
5	The healthcare providers and staff are neat and tidy in appearance.	Tangibility

From the above table, the ranking of patients' expectation is evaluated from top to five. The highest expected mean scores before visiting the healthcare center are responsiveness, tangibility, reliability, empathy and assurance respectively. It can be said that the respondents are more concerned about the tangibility factor than other factors.

In accordance with tangibility, the respondents have expected how much they can get service information easily, and whether they will be provided the healthcare services by smart, neat and tidy healthcare providers. In accordance with highest mean score on responsiveness factor, the customers have expected much about the healthcare center services whether the providers can give excellent guidelines for medication, follow up plans and any other habits for using healthcare services.

According to reliability factor, the customer expectations are same direction to doctors. They have expected on doctors how much they are skillful and how long they spent consultation hours about patients' problems and treatment plans. In accordance with Empathy factor, the patients have expected whether the administrative leaders also give personal attention to their customers to fulfil the customers' needs and wants. According to assurance factor, it is always important patients' trust for doctor's expertise and skill. If the doctors are not skillful enough, it may also threat patients' safety and results negatively customers' loyalty.

Table 5.2 Top Five Highest Perception results

Ranking	Questions	Service factors
1	The instructions for medication, prescriptions and follow up plan are clear and easy to understand.	Responsiveness
1	Patients trust the doctors' expertise and skills.	Assurance
1	Staff are able to provide personal care services to the patients.	Empathy
2	The doctors are expert in their respective subjects.	Reliability
3	Feel secure in using the services of healthcare center.	Assurance
4	The healthcare providers can perform the services as promised.	Reliability
4	The doctors usually spent enough time to consult the patients about possible treatment options.	Reliability
5	Doctors and nurse also provide prompt response to patients' problems and complaints	Responsiveness

Table 5.2 demonstrates the highest perceptions of customer after purchasing the healthcare services. The highest expectation and highest perception are strongly the same question of responsiveness factor. It can be roughly assumed that the customers have perceived the healthcare service about this item as much as they expected. The staff from Thitsar Specialist Center had trained how to pay attention the customers about the instructions for medication, prescriptions and follow up plan because the patients cannot understand the medical terms.

The most frequently factor concerned with highest perception ranking is the reliability dimension and the items are “The doctors are expert in their respective subjects.” “The healthcare providers can perform the services as promised.” And “The doctors usually spent enough time to consult the patients about possible treatment options.” Although the healthcare center has much requirements about its infrastructures, the customers’ purchase decision for Thitsar Specialist Center may be the factor that the doctors are expert in their respective subjects and they usually spent enough consultation time for the patients’ problems.

Moreover, the healthcare center always weighs the development of its crews in providing the healthcare services as promised. Thus, the result stands on one of the highest perception outcomes. Relating this result, staff are also pay personal care attention to patients. So, empathy factor about the customer care service includes top five perception result.

For the assurance factor, the two items “Patients trust the doctors’ expertise and skills.” and “Feel secure in using the services of healthcare center.” are related vice visa. The result of customers’ trust on doctors’ abilities and skills may lead to their feelings of safety in using the healthcare services.

In This study, the researcher pays less attention about customer least expectation because these items may rarely be affected on customer satisfaction of healthcare center.

Table 5.3 Top Five Least Perception results

Ranking	Questions	Service Factors
1	The waiting Area is wide and pleasant.	Tangibility
2	The doctors are punctual at all times.	Reliability
3	Waiting hours for services are acceptable.	Responsiveness
4	The equipment are up-to-date things	Tangibility
4	Healthcare providers always offer prompt services.	Responsiveness
5	Healthcare center has clean and hygiene environment.	Tangible

From the ranking result of above table, tangibility and reliability factors are the least perceived outcomes. The customers are not satisfied with these factors when they actually encountered the healthcare service. The questions related to tangibility factor are whether the waiting area is wide and pleasant, whether the healthcare center use the up-to-date equipment and whether healthcare center has clean and hygiene environment. There is the main problem in Myanmar healthcare industry that the unequal ratio of doctors, nurses and customers leads to work overload and consequently result of much waiting hours for the customers. This process also effects the waiting area and the customers perceived the tangible factor of dissatisfy waiting area. The least perception ranking score also indicates that the equipment, furniture and infrastructures of healthcare center are not updated enough comparing to the luxury hospitals. Moreover, the healthcare center needs to be clean enough to satisfy the customers because healthcare business is based on hygienic condition.

The item concerned with reliability factor “The doctors are punctual at all times.” and the item related with responsiveness factor” Waiting hours for services are acceptable.” include least perception ranking and these two items also gives the vice visa result. Mentioned above, the doctors are not punctual at all time because of

work overload and therefore waiting hours for medical treatment leads to patients' least perception. For the factor responsiveness, the question whether healthcare providers always offer prompt services gives the least perception ranking outcome. It is the essential requirement for healthcare industry to offer prompt services because working nature of healthcare sometime needs to perform in-time procedures. For this concern, the respondents rank this factor as least perception.

Table 5.4 Top Five Highest Gap Ranking (P-E)

Ranking	Question	Service Factors
1	The doctors are punctual at all times.	Reliability
2	Waiting hours for services are acceptable.	Responsive -ness
3	The waiting Area is wide and pleasant.	Tangibility
4	The leaders of healthcare center also give personal attention to the patients.	Empathy
4	Information can be got easily by means of pamphlets, business card and social media platform.	Tangibility
5	Healthcare providers always offer prompt services.	Responsive -ness

According to the findings, as shown in above table 5.4, when comparing the expectation of the respondents before coming to the healthcare center and the perception of the respondents after they have been received service from the healthcare center, the respondents are not satisfied with tangibility, reliability, responsiveness and empathy factor of the healthcare center because the gap score are all negative.

The respondents are not satisfied with the item that the doctors are punctual at all time. They think that they spent much waiting hours and sometimes they miss social-economic activities due to the doctors are not punctual. Thus, the founder and management team need to establish efficient appointment program and online booking to avoid waste waiting hours. The questions related to tangible factor are whether the waiting area is wide and pleasant, and

whether information can be got easily by means of pamphlets, business card and social media platform. The first question can get answer from providing more wide

space for waiting area, and reducing the problems of too much waiting time. The second gap can easily find out by providing suitable information service on line and on ground. The gap score related to empathy factor is “The leaders of healthcare center also give personal attention to the patients.” The administrative team members need to express personal care and empathy which every respondent likes.

Comparing with the previous research conducted at Thingangyun Sanpya General Hospital which occupied 500 beds in Yangon get the observation result that all the SERVQUAL dimension positively impact on patients’ satisfaction.

When compared with the previous research conducted at Universitas Jenderal Soedirman, Indonesia stated that all SERVQUAL dimensions affect the patients’ satisfaction. (Rifka Annisa Puspitasar, Ratno Purnomo, Lantip Rujito, 2020)

5.2 The discussion of five service quality factors and the impact of customer satisfaction

From the correlation analysis, the Pearson correlation between variables shows the strongly associations each other at 1% significant level because r values of all dimensions are above 0.7 and nearly closed to 1. According correlation analysis, it supported the research hypothesis.

According to ANOVA table, larger F -value of 3421.348 indicates the regression model is better and indicates a greater difference between the group means. P value is 0.000 which is less than 0.05(5% significant level) and shows that the null hypothesis can be rejected.

By using multiple linear regression analysis, the coefficient of the multiple regression R value is 0.994 can be expressed the association between the current values and the expected values of the patients’ satisfaction. The R value of 0.994 shows that there is a very strong and positive relationship between the five dimensions of service quality (independent variables) and patients’ satisfaction (dependent variables).

But the coefficient table express the p-value of 0.000 which less than 0.05(95% confidence level) only for tangibility and empathy dimension. Thus, the tangibility dimension and empathy dimension have statistically significant relationship with patients’ satisfaction. The p -values of the rest three dimensions are higher than 0.05,

it can be said that there is no significant difference between these three dimension and patient satisfaction.

By gap mean scores, except responsiveness dimension, the other four dimensions concern with the customer satisfaction. For tangible dimension, the mean score of perception does not reach that of expectation, resulting the negatively concern with patient satisfaction. The three other dimensions deal the positive mean scores and show the positively concern with patients' satisfaction.

By Gap model, except assurance dimension, the other four are negatively concern with highest gap scores for patient satisfaction. For assurance factor which contain patients' trust on doctor skill, staff's capability without mistakes, problem solving skill of staff and accuracy of

diagnosis test can exactly impact on patients' satisfaction because this factor concerns with the positive outcome for patients.

Healthcare is more complex than other service industries and patients' satisfaction has a wide range for measuring different needs and wants. Thus, not a single dimension can assess the service quality effectively. Therefore, all service dimensions significantly influence for patients' satisfaction.

Table 5.5 Hypothesis Discussion

Hypothesis	**Result** **Accept/Reject (null H)**
H1: Significant relationship between tangibles and patient satisfaction	Reject
H2: Significant relationship between reliability and patient satisfaction	Reject
Significant relationship between responsiveness and patient satisfaction	Reject
Significant relationship between assurance and patient satisfaction	Reject
Significant relationship between empathy and patient satisfaction	Reject

5.3 Managerial Implications and Recommendation

5.3.1 Effects of Tangibility on Patient's satisfaction

Based on regression analysis, tangibility has strongly associated with patient satisfaction. Since the tangible tools are first line measurements for patient's satisfaction and service quality, they should be set up properly. Although the tangibles determinants are less important than other service dimensions, it is essential to be modernized in the fields of imaging and diagnosis finding tests. Thus, this factor impacts not only patient satisfaction but also service performance with competitive advantages in private healthcare sector. For Thitsar Specialist Center, founder and management team have to provide wide space for waiting area and globalized service information system to fill service quality gap.

5.3.2 Effects of Reliability on Patient's satisfaction

The Reliability factor is also significant for patients' satisfaction, but least important than other dimensions. In this dimension, the clients refer to their concern with promised service available, timely test results, doctors' attention and consultation procedure, accurate bills and staff awareness. Although these factors seem not to be important, the administrators may be contrary the goodwill of healthcare center if they cannot manage deeply these reliability measurements. Thitsar's healthcare managers should emphasize not only on the capability of service staff but also doctor's convenience on transportation to be narrow the service quality gap.

5.3.3 Effects of Responsiveness on Patient's satisfaction

Responsiveness dimension has significantly influence on patient's satisfaction. Responsiveness factors such as prompt service, acceptable waiting hours, clear information and explanations, prompt response to unexpected condition and clear instruction about healthcare delivery service are important factors in determining not only service quality but also reputation of the healthcare center. Sometime, healthcare can be regarded as in-time process to rescue human lives and responsiveness is the key factor in this work environment. For Thitsar, the clients perceived that the staff cannot offer prompt services and therefore, the management team has to find out the way which can provide the quick services

5.3.4 Effects of Assurance on Patient's satisfaction

Assurance dimension is the most important not in healthcare industry but in all other business environments. In healthcare industry, it mainly indicates patients' trust on doctors and other healthcare providers in terms of proficiency and skillfulness, and accuracy of screening tests. Their opinions about manners and behaviors of the doctors and other staff

result the recommendations to others for purchase decision of healthcare service safely.

So, Thitsar's managers should emphasize to keep attention on patients' feelings of safety in purchasing healthcare services provided by Thitsar.

5.3.5 Effects of Empathy on Patient's satisfaction

Empathy axis is also important to determine the patient's satisfaction. Since most of the patients are unease with physically and mentally, the communication with charity, polite words, emotional support and individualized attention will lead to the patient's recovery and then patient's loyalty. In Myanmar, lack of human resources in healthcare sector is the main problem to give enough time for patients. Moreover, unequal ratio of service providers and consumers in healthcare industry leads to overloading in working environment and it may result bad interaction with providers and patients. For private healthcare centers, providing patients' centered care with efficient providers are the key factors for patient's satisfaction and brand building. For Thitsar Specialist Center, the Gap model indicates the gap score that it needs to pay attention, individualized care on patient by the healthcare leaders. So, the managers and administrators of Thitsar have to give effort in accordance with patients' centered care and treatments to be excellent.

For overall recommendations, the researcher suggests Thitsar Specialist Center to keep attention on giving training and development programs for efficiency of healthcare providers and other frontline staff. Moreover, effective staffing process for HR department is also important to get qualified providers. Thitsar's managers should emphasize to transform the working environment as an active and pleasant area with high attitude employee. To keep this condition, Thitsar need to do quarterly performance appraisal (using key performance indicator-KPI) for each of the staffs and make reward or fine policy plan accordingly. Human resource is the key player

for service industry as well as any business organization, thus Thitsar's management team has to keep attention about employee's job satisfaction, motivation and even health condition to build brand and loyalty.

5.4 Limitations and Further research

This research report is based on the primary data. Moreover, sampling and data collections is done within two months only. Therefore, if the researcher filled the questionnaires in a wrong way, it will threat the accuracy of the results.

The researcher used only SERVQUAL model with 5 dimensions to examine the impact of service quality on patient's satisfaction and no other models are used to measure the research problem.

Since the researcher conducted the survey only at Thitsar Specialist Center and not other healthcare centers, the findings also represent the relationship between service quality and patient's satisfaction of Thitsar. In addition, the researcher kept attention the service industry and focused on only one healthcare center, the report result may represent only healthcare service industry and this result can not recommend for other industries.

In order to get accurate and perfect vision of healthcare industry, it is advised to make further research on both private and public hospitals, both local and international hospitals since customer perceptions may differ.

While providers' attitudes and opinions were not undertaken, qualitative methods should be used to address the research objective. To get the strength of research, more sample size should survey and give enough time for the next research.

References

Al-Damen, R. (2017, August 12). Health Care Service Quality and Its Impact on Patient Satisfaction. *International Journal of Business and Management, vol 12*(no 9), 17. doi:https://ccsenet.org/journal/index.php/ijbm/article/view/69370

Al-Daoar, R. M., & Zubair, D. M. (2018, April 20). Service Quality and its Impact on Patients' Satisfaction in Yemeni Private Hospitals. *Jour of Adv Research in Dynamical & Control Systems, 10*(5), 1705-1711. Retrieved March 15, 2018, from file:///C:/Users/hp/Downloads/Documents/Serqual%209%20VIP.pdf

Andrabi, S. A., Shamila, H., Jabeen, R., & Fazli, A. (2015, April). A Cross Sectional Study to Improve Quality of Care at a Tertiary Care Hospital at Srinagar, India. *KERALA MEDICAL JOURNAL, vol 7*(issue 2), 43-46. Retrieved Jume 29, 2015, from file:///C:/Users/hp/Downloads/Documents/359-Article%20Text-593-1-10-20180612.pdf

Baba, R. M., Aburahmeh, D., & Elrasheed, D. (2017, July). The Impact of Application of Health Services Quality Dimensions on Customer Satisfaction in Jordan Governmental Hospitals. *International Annals of Medicine, 1*(6), 1-18. doi:10.24087/IAM.2017.1.6.180

Babu, N. S. (2012, October). A STUDY ON PATIENT SATISFACTION IN HOSPITALS. (D. G. Dominici, Ed.) *Internal Journal Of Management Research and Business Strategy, vol 1*(No 1), 20. doi:ISSN 2319-345X www.ijmrbs.co

Christia, J., Ard, A., & Runion, L. (2021). SERVQUAL Measur AL Measurement in a Healthcar ement in a Healthcare Setting. (D. Edmondson, Ed.) *Atlantic Marketing Journal, 10*(1/3), 18. Retrieved 2021, from https://digitalcommons.kennesaw.edu/amj/vol10/iss1/3

Christia, J., Ard, A., & Runion, L. (2021). SERVQUAL Measur AL Measurement in a Healthcar ement in a Healthcare Setting. *Atlantic Marketing Journal , 10*(1). Retrieved from https://digitalcommons.kennesaw.edu/amj

Çıtak, F. S. (2024, Aprial 15). *Forms.app*. Retrieved from Google: https://forms.app/en/blog/gap-model-of-service

Cronin Jr., J. J., Brady, M. K., & Hult, G. M. (2000, June). Assessing the effects of quality, value, and customer satisfaction on consumer behavioral intentions in

service environments. *Journal of Retailing, vol 76*(Issue 2), 193-218. doi:10.1016/S0022-4359(00)00028-2

Edlund, M. J., Young, A. S., Kung,, F. Y., Sherbourne, C. D., & Wells, K. B. (2003, May). *Researchgate*. (Researchgate.net) doi:DOI: 10.1111/1475-6773.00137 ·

Felman, A. (2020, April 20). *Medical News Today*. Retrieved from Wikipedia: https://www.medicalnewstoday.com/articles/150999

Ghara, A. A., Shojaee, J., Abedi, G., Saimian, H., Abedini, E., & Rostami, F. (2016). Patients' Expectations and Perceptions of Service Quality in the Selected Hospitals. *Medical Archives , 70*(2), 135-139. doi::10.5455/medarh.2016.70.135-139

Israel, G. D. (1992). *Determining sample size.* Institute of Food and Agricultural Sciences, Florida Cooperative ExtensionService. Gainesville 32611: Institute of Food and Agricultural Sciences, University of Florida. Retrieved November 1992, from https://www.scribd.com/document/240720103/Sample-Size

Lee, D., & Kim, K. K. (2017, March 1). Assessing healthcare service quality. *International Journal of Quality Innovation, vol 3*(n0.1), 15. doi:DOI 10.1186/s40887-016-0010-5

Min, M. M. (2020, October 2). *CMMU Digital Archive*. Retrieved March 10, 2021, from Google: https://archive.cm.mahidol.ac.th/handle/123456789/32

Mon, E. M. (2019). THE STUDY OF SERVICE QUALITY AFFECTING CUSTOMER SATISFACTION OF PRIVATE HOSPITAL IN MYANMAR . *A THEMATIC PAPER SUBMITTED IN PARTIAL FULFILLMENT OF THE REQUIREMENTS FOR THE DEGREE OF MASTER OF MANAGEMENTCOLLEGE OF MANAGEMENT* , 1-53. Retrieved August 14, 2019, from https'//archive.cm.mahidol.ac.th/bitstream

Ofili, O. U. (2014, October). PATIENT SATISFACTION IN HEALTHCARE DELIVERY. *European Scientific Journal, 10*(25), 25-39. doi:10(25):1857-7881

Othman, A., & Yao, L. (2014, June). An Empirical Analysis on the Relationships Between Service Quality and Customer Satisfaction in the MalaysianHealthcare Services . *Economics World, 2*(6), 357-368. doi: 10.17265/2328-7144/2014.06.001

Padma, P., Rajendran, C., & Sai, L. (2009). A conceptual framework of service quality in healthcare. *Benchmarking: An International Journal, 16*(2), 157-191. doi:10.1108/14635770910948213

Rashid, M. H., Mansor , A. A., & Hamzah, M. s. (2011). Service Quality and Patients'Satisfaction in Healthcare Service in Malaysia. *International Journal of Customer Service Management, 1*(1), 41-49. Retrieved from file:///C:/Users/hp/Downloads/Documents/Serqual%2017.pdf

Rifka Annisa Puspitasar, Ratno Purnomo, Lantip Rujito. (2020). THE EFFECT OF SERVICE QUALITY ON PATIENT SATISFACTION OF HOSPITAL SERVICE QUALITY. *International Sustainable Competitiveness Advantage*, 718-727.

Sajid, M., & Baig,, M. K. (2007). An absolute necessity for public satisfaction. *International Journal of Health Care Quality Assurance, vol 20*(issue 6), 545-548. doi:10.1108/09526860710819477

Team, I. E. (2023, March 11). *Indeed*. Retrieved from Wikipedia: https://www.indeed.com/career-advice/career-development/gap-model

Uzun, Ö. (2001). . Patient Satisfaction with Nursing Care at a University Hospital in Turkey. *Journal of Nursing Care Quality, vol 16*(issue 1), 24-33. doi:: 10.1097/00001786-200110000-00004

WG, M. (1992, February 26). *Europe PMC*, 6. (Pub Med Central) doi:PMC1069855

WHO. (2024, May 13). *World Health Organization*. Retrieved from Wikipedia: https://www.who.int/health-topics/quality-of-care#tab=tab_1

Zaim, H., Bayyurt , N., & Zaim, S. (2010, May). Service Quality And Determinants Of Customer Satisfaction In Hospitals. (H. Zaim, Ed.) *International Business & Economics Research Journal, vol 9*(number 5), 8. doi:DOI: 10.19030/iber.v9i5.8145

APPENDIX

Questionnaires for the study of impact of service quality on patient's satisfaction : A case study of Thitsar Specialist Center in Yangon, Myanmar.

A questionnaire is a part of independent study for Master of Business Administration (MBA), Swiss School of Business Research, and it takes only 5-7 minus to answer the question.

The questionnaire is composed of two parts and each part is made up of two sections. Each part contains a direction how to fill the questions. You can provide the answers independently and this information will be kept anonymous and confidential.

Questionnaire Part (1), section 1.1 – Demographic data

section 1.2 – service quality (your expected version)

Please fill questionnaire part (1) before you purchase the healthcare service.

Questionnaire Part 2, section 2.1 - service quality (your perceived version)

section 2.2 – your satisfaction level

Please complete the questionnaire part (2) after you have received the healthcare service.

To Click the button

Part (1) Section 1.1: Demographic Questions

(1) Respondent's Gender □ Male □ Female

(2) Age
□ Under 20 years old
□ 20 - 29
□ 30 - 39
□ 40 - 49
□ 50 years old and above

(3) Education
□ Up to High School
□ Under Graduated

□ Graduated

□ Master Degree

□ PhD & Others

(4) Occupation

□ Employer

□ Employee(Salary)

□ Self-employee

□ Un-employee

□ Student

(5) Income Level (Monthly)

□ Less than 300,000 Kyats

□ From 300,000 kyats to 500,000 kyats

□ From 500,000 kyats to 700,000 kyats

□ From 700,000 kyats to 900,000 kyats

□ 900,000 kyats and above

(6) Frequency of visits to this clinic during the year

□ 1 time
□ 2 times
□ 3 times
□ 4 times and above

Part (1) Section 1.2: Service quality (your expected version)

Please check (Â) in the box according to your degree of agreement on each statement, Expectation Part (before taking the services) by using the following scale 5 = strongly agree, 4 = agree, 3 = Moderate, 2 = Disagree, 1 = Strongly Disagree

There are no right or wrong answers—all we need to know is a number that truly reflects your feelings regarding the service quality of Thitsar Specialist Center.

Note: The headings (Tangible, reliability, etc.), shown here are to indicate which statements are under each dimension, and they were not included in the actual questionnaire

Questionnaire Part (1) Section 1.2 (Expectation Version)

No	Service Quality Dimension	Expectation (Before taking service)				
		Strongly Agree	Agree	Moderate	Disagree	Strongly Disagree
	Tangibles					
1	The equipment are up-to-date things					
2	The waiting Area is wide and pleasant.					
3	Healthcare center has clean and hygiene environment.					
4	The 24-hour water, electricity and security systems are safe and comfortable.					
5	Information can be got easily by means of pamphlets, business card and social media platform.					
6	The healthcare providers and staff are neat and tidy in appearance.					
	Reliability					
7	The healthcare providers can perform the services as promised.					
8	The staff are ready for all time to answer the patients' inquiry and requests.					
9	Laboratory tests and X ray services are delivered punctually.					

10	The doctors are punctual at all times.					
11	The doctors usually spent enough time to consult the patients about possible treatment options.					
12	The doctors are expert in their respective subjects.					
13	Healthcare center can give accurate bills for the services.					
	Responsiveness					
14	Healthcare providers always offer prompt services.					
15	Waiting hours for services are acceptable.					
16	Healthcare providers always inform the patients clearly which services will be performed.					
17	Healthcare providers always offer prompt services.					
18	Waiting hours for services are acceptable.					
19	Healthcare providers always inform the patients clearly which services will be performed.					
	Assurance					

20	Patients trust the doctors' expertise and skills.					
21	Staff can do their task without mistakes.					
22	Staff are skillful and knowledgeable to solve the patients' problems.					
23	X rays and Laboratory reports are accurate and believable.					
24	Feel secure in using the services of healthcare center.					
	Empathy					
25	Doctors and nurses have individualized attention to patients.					
26	Doctors and nurses provide the patients with their ultimate care.					
27	Nurses are polite and friendly dealing with patients or patients' family.					
28	Staff are able to provide personal care services to the patients.					
29	Healthcare center always prioritizes the recovery of patient's health.					

30	The leaders of healthcare center also give personal attention to the patients.					

Part (2) Section 1.1: Service quality (your perceived version)

Please check (Â) in the box according to your degree of agreement on each statement,

Perception Part (after taking the services)

Questionnaire Part (2) Section 2.1 (Perception Version)

No	**Service Quality Dimension**	**Perception (After taking service)**				
		Strongly Agree	**Agree**	**Moderate**	**Disagree**	**Strongly Disagree**
	Tangibles					
1	The equipment are up-to-date things					
2	The waiting Area is wide and pleasant.					
3	Healthcare center has clean and hygiene environment.					
4	The 24-hour water, electricity and security systems are safe and comfortable.					
5	Information can be got easily by means of pamphlets, business card and social media platform.					
6	The healthcare providers and staff are neat and tidy in appearance.					
	Reliability					

7	The healthcare providers can perform the services as promised.					
8	The staff are ready for all time to answer the patients' inquiry and requests.					
9	Laboratory tests and X ray services are delivered punctually.					
10	The doctors are punctual at all times.					
11	The doctors usually spent enough time to consult the patients about possible treatment options.					
12	The doctors are expert in their respective subjects.					
13	Healthcare center can give accurate bills for the services.					
	Responsiveness					
14	Healthcare providers always offer prompt services.					
15	Waiting hours for services are acceptable.					
16	Healthcare providers always inform the patients clearly which services will be performed.					
17	Staff don't hesitate to serve the patients' needs and requests.					

18	Doctors and nurse provide prompt response to patients' problems and complaints					
19	The instructions for medication, prescriptions and follow up plan are clear and easy to understand.					
	Assurance					
20	Patients trust the doctors' expertise and skills.					
21	Staff can do their task without mistakes.					
22	Staff are skillful and knowledgeable to solve the patients' problems.					
23	X rays and Laboratory reports are accurate and believable.					
24	Feel secure in using the services of healthcare center.					
	Empathy					
25	Doctors and nurses have individualized attention to patients.					
26	Doctors and nurses provide the patients with their ultimate care.					

27	Nurses are polite and friendly dealing with patients or patients' family.					
28	Staff are able to provide personal care services to the patients.					
29	Healthcare center always prioritizes the recovery of patient's health.					
30	The leaders of healthcare center also give personal attention to the patients.					

Questionnaire Part (2) Section 2.2 (Customer's Satisfaction)

Please check (Â) according to your satisfaction level for each statement by using the following scale 5 = very satisfied, 4 = satisfied, 3 = Neutral, 2 = Dissatisfied, 1 = very dissatisfied

No	**Items**	**Satisfaction level**				
		Very satisfied	**Satisfied**	**Neutral**	**Dissatisfied**	**Very dissatisfied**
	About Your Purchase Decision					
1	You will share about the good service to others.					
2	You feel satisfy about overall services of Thitsar Specialist Center.					
3	You are wiliness to return to this healthcare center if you need to get healthcare service again.					

Thank you for taking your valuable time to complete this survey.