Summary of Findings and Suggestions

Introduction

The aim of the present chapter is to provide conclusions leading to a suggestion of the possibilities for better marketing of services in corporate hospitals.

Marketing and all activities connected with it such as advertising were once regarded as loathsome and offensive in a hospital set-up. When marketing was first introduced in hospitals, the impulsive reaction of most people both inside and outside the hospital was one of concentration and disbelief that authorities even contemplated using marketing techniques including in advertising in hospitals. Things have changed however, in recent years. Hospital marketing while slowly coming of age in over country still carries a stigma in the eyes of many hospitals in India.

Marketing in hospitals is not ‘selling’ In the words of Robert Shafner, hospital marketing is basically seeing what the public perceives as its needs, and the hospital identifying those needs and developing the services it is capable of delivering to satisfying those needs. In other words, when a hospital embarks on a marketing programme, it seeks to identify the needs of present and prospective patients and tries to meet those needs by developing appropriate services. It then seeks to provide information about these services and promotes them to attract patients.

Most of the hospitals face a variety of marketing problems. Some have arisen recently due to decreased funding and changing reimbursement policies, employer groups and third parties, to regulatory policies affecting the organization’s ability to provide service, and to changing market place characteristics. Fortunately, hospitals are how beginning to apply marketing to a broader set of problems. Where should the hospital locate a medical office building or free-standing ambulatory care unit? How can the hospital estimate whether a service will draw enough patients? What strategy should the organization adopt to attract certain categories of patients? How can the hospital attract more consumers to preventive care services, such as annual medical checkups and cancer screening tests? How can hospitals successfully compete against nursing registers in the recruitment of nurses who are in short supply? What marketing programs can build goodwill or more contributions?
Marketing broad objective is to influence the level timing, and character of demand in a way that helps the organization to achieve its objectives. Marketing is not just a management function. It is a total organization orientation. This creates an organization that is highly responsive, adoptive, and entrepreneurial in a rapidly changing environment.

**Objectives of the Study**

The study falls under the area of marketing. The theme in broad is to analyze the marketing mix and how far this tool useful in the present situation and to compare the hospitals which run under different managements. The broad objective for which the research has been undertaken is to investigate in to the marketing process i.e. 7p’s of services marketing in selected super-specialty hospitals. Therefore, it has been thought fit to evolve a suitable marketing programme to the selected hospitals. Specific objectives of the research can be discussed under the following heads.

- To study the growth and working of hospitals.
- To present the technical framework of 7P’s.
- To analyze the different P’s in selected hospitals.
- To study the perceptions of doctors, nursing and administrative staff.
- To ascertain the satisfaction levels of patients in selected hospitals.
- To suggest suitable measures for effective marketing the services of the sample hospitals.

**Hypothesis**

Most of the hypotheses developed for the study are based on commonly held notions. The hypotheses framed for this purpose are

1) The perceptions of the doctors, nursing staff and administrative personnel in the hospitals are indistinguishable with respect to the (Product/Service, Price, Place, Promotion, People, Physical Evidence and Process) marketing of their services.
2) The perceptions of the patients in the two hospitals are indistinguishable with respect to the (admission, comfort, food facilities, care, business office and discharge) performance of the hospitals.
3) The hospitals that serve on the principles of marketing can gain better patient satisfaction.


**Scope of the Study**

The scope of the present study extends to analyze how far the marketing mix i.e. 7p’s of services marketing; product/service, price, promotion, distribution, people, physical evidence and process are carried out effectively in sample units. The assumption is that the hospital run on sound marketing principles will excel and patient satisfaction will be high. For this purpose it is proposed to elicit the perceptions from the doctors, nursing staff and administrative staff. In the next step, an attempt has been made to elicit the opinions from patents. Patients’ perceptions about medical care are increasingly important because the success of a hospital depends on the satisfaction of the users.

**Limitations of the Study**

The primary limitation of this study relates to the behavioral sciences. The basic limitation of behavioral sciences is that they would deal with attitudes. These attitudes differ from individual to individual. Even though utmost care has been takes in selecting the sample, the results derived form a study may not be exactly equal to the true value of the population. The second limitation of this study is the size of the problem; the study is limited to marketing only. It has become difficult for the researcher to collect data from different hospitals. Therefore popular two sample hospitals are selected.

**Methodology**

The present study is an attempt to probe into private health care in Hyderabad and examine the performance of each hospital in marketing their services. Private in this study refers to the corporate sector; therefore the scope is limited to private hospitals only.

**Selection of Sample Hospitals**

The researcher has selected two different hospitals in Hyderabad city. They are APOLLO HOSPITAL Jublihills and CARE HOSPITAL Banjarahills. They run on modern scientific and high tech lines, under the control of private management.

**Collection of Data**

The data has been collected from both sources i.e. primary and secondary. For collection of data from primary sources, efforts were made to elicit the opinions of almost all personnel in the organizations through observation, personal interviews, questionnaires and schedules. In this context it is proposed to distribute two types of questionnaires and each type carries two parts.
The first type was distributed to the doctors, nursing staff and administrative personnel and the second type of questionnaire was distributed to the patients. Beside primary data, wherever necessary the information has also been collected from the reports of central and state governments. The researcher visited and collected information from the various institutions whenever needed.

**Statistical Methodology**

Here an attempt has been made to observe whether two hospitals be distinguished with respect to marketing of their services. In order to rate the performance, average count responses for five points were taken as basis. Analysis of variance is used to know

**Selection of Sample Size**

The questionnaire for doctors, out of 156 in Apollo, 75 doctors (half of the 156) were selected as samples for final analysis by using stratified random sampling method and questionnaire was distributed. Out of 127 doctors in Care 75 doctors were selected as sample (three fourth of 127) for final analysis. In the case of questionnaire developed for nursing staff, out of 560 in Apollo, 150 respondents (one fourth of 560) were selected as sample by using stratified random sampling for final analysis. Out of 510 nurses in Care, 150 nurses were selected for final analysis (i.e. one fourth of 510). The questionnaire for administrative personnel was distributed to 45 numbers in Apollo, and 35 numbers were selected (three fourth of 45) as sample for final analysis by using stratified random sampling. Out of 40 administrative personnel in Care, 35 persons are selected for final analysis.

**Selection of Sample for Patient Satisfaction Survey**

In order to find out an answer to the question as to how far the high technology hospitals have attained their organizational goals, an attempt has been made to collect information from users (patients) of the hospital services. In this study the word ‘patients’ refers to only the ‘in-patients’ and their opinions only have been sought in sample hospitals. It is in view that the in-patients spend more time in the hospitals than the out-patients and they have a lot of exposure and access to the hospital environment and treatment. Further, in this research, prominence is given to the opinions of the cardiac patients, who most joins as in-patients in the hospitals. More over, the sample hospitals that have been chosen are known for their services in cardiac related problems. Questionnaires were prepared for patients and the sample respondents were drawn through stratified random sampling. The patients are taken on the basis of bed capacity of each sample
hospital. It is observed that there are approximately 550 beds in Apollo and in case of Care it is 460. The schedules were distributed to 300 patients in Apollo and 250 respondents were selected for final analysis. In case of Care 290 schedules were distributed and 250 respondents were selected for final analysis.

**History of Selected Hospitals**

(a) **APOLLO Hospital (Jubileehills, Hyderabad)**

Apollo Hospitals, Jubilee Hills, Hyderabad is a 550-bed tertiary care centre, with 95% of occupancy rate. It has over 50 medical and surgical disciplines. Spread over a campus area of 35 acres, the hospital has a built-up area of 190,000 square feet. Its services are supported by sophisticated technology and experienced medical professionals. Most of the consultants at the hospital have international experience either educational, work experience - related or observational. The average staff to patient ratio for the hospital is 3:1 with a 1:1 ratio prevailing in priority areas like the Intensive Care Unit and the Cardiac Care Unit. Apollo Hospitals, Hyderabad handles close to 100,000 patients a year. The institution is having 156 doctors, there are more than 560 nursing staff and 45 administrative personals.

(b) **CARE Hospital (Banjarahills, Hyderabad)**

The Care Group of Hospitals owned by Quality Care India Limited (QCIL) acquired a five-star hotel premises at Banjara Hills, Hyderabad in the year 2000 and converted it into a 200 bed multi-specialty hospital in the year of 2002. Today, the Hospital stands tall with 460 beds, including 120 critical care beds, with annual inflow of 1, 80,000 patients for consultations, and 16,000 patients for admission. The institution is having 127 fulltime doctors, 510 nursing staff and 40 administrative personnel. Care Hospital, The Institute of Medical Sciences, Banjara Hills, the flagship Hospital of Care Group, comprises contemporary accommodation facilities ranging from general wards to super deluxe rooms. Their services range from inpatient care such as Intensive Care, Cardiac Care, Neurological Care, Pediatric Care, Medical Care, Surgical Services, Diagnostic and Emergency Services to outpatient services such as Outpatient Consultancy, Non-Invasive Laboratories, Life Style Clinic Which Practices Preventive Medicine, Radiology, Respiratory Therapy, Physiotherapy And Home Health Care etc.
Major Findings of the Study

Growth and Working of Hospitals in India

A number of health problems require intensive medical treatment and personal care which normally are not available at the patients’ home or in the clinic of a doctor. The hospital, a major institution, offers considerable advantage to both patient and society. It is the place where a large number of professionally and technically skilled people apply their knowledge and skills with the help of world class expertise, advanced and sophisticated equipment and appliances. Today’s healthcare environment and hospital needs are shifted dramatically, which is characterized by, competition, surplus of supply is the form of mushrooming of hospitals, and nursing homes, diminished demand, informed consumers who demand better standard of service etc. Hospitals, for their part, are introducing new programmes that need to be promoted to the public. They endeavor to enhance the quality of their service, and bring at most satisfaction of the patients. Marketing is an excellent competitive weapon; hospitals can use to achieve these goals. Marketing makes the hospitals as a responsive organization. People who come in contact with responsive organizations report high level of satisfaction. Marketing involves the hospital in studying the target market’s needs and wants, designed appropriate services, and using effective pricing, communication and distribution to inform, motivate and service the customer finally attaining higher patient satisfaction

Hospital as a Service Organization

In this part effort has been made to show that hospital qualifies for all definitions and characteristics of services. Services have a number of unique characteristics that make them so different from products. Some of the most commonly accepted characteristics are intangibility, inseparability, heterogeneity, perishability. Hospital organization fits in with the definition and characteristics. In hospital service, there is nothing which is tangible, which can be physically touched, or verified and also which is not perishable.

History of Hospitals

History of hospitals dealt with different phases such as hospitals in ancient times, hospitals in Middle Ages, hospitals in 19th century and development of modern hospitals. The major changes in the concept of hospitals are divided into different periods such as trusteeship period, physician period, and administration period.
Growth of Hospitals in India

The Ayurvedic system of medicine was developed in India after the Aryan invasion of the Indus Valley. In sixth century BC during the time of the Buddha there were a number of hospitals to look after the crippled and the poor. More such hospitals were started by Buddha’s devotees. Ashoka was responsible for spread of social medicine. The outstanding hospitals in India at that time were those built by king Ashoka. The use of allopathic system of medicine commenced in 16th century with the arrival of European missionaries in south India. The first hospital in India was probably built in Goa. The first hospital in Madras was opened in 1664. The establishment of a hospital in Mumbai was opened in 1664. The establishment of a hospital in Mumbai was in 1676. The earliest hospital in Calcutta was built in 1707-08 and in Delhi in 1874. In 1835 there were 1250 hospitals and dispensaries in India. In 1857, three universities started medical education in a formal way. During the period 1800-1916, 17 medical schools/colleges were started in various cities.

The Modern Hospital – A Complex Entity

That the modern hospital is an extremely complex organization is evident from the fact that it provides essential services, must be available 24 hours a day. Obviously, the hospitals differ from other organizations in that they deal continuously with the problems of life and death. The hospital is faced by a unique set of issues and characteristics. These characteristics in Indian context can be summed up thus

(i) Hospitals are operated continuously. This leads to high cost and causes personnel and scheduling problems.

(j) There is wide diversity of objectives and goals among the individuals, professional groups and various sub-systems. Hospital components are responsible to participate inpatient care, education, research, prevention of prospective ailment, accommodation and intricate medical and surgical procedures. These activities are generally conflicting effective co-ordination is becoming difficult in minimizing this conflict and obtaining the maximum support in achieving hospital mission.

(k) Hospital personnel range from highly skilled and educated, unskilled and uneducated employees. The major responsibility of the hospital manager is to get work from these diversified groups. Unionization among personnel complicates human resources management in hospitals.
(l) Many components of hospital operation have dual lines of authority. Physicians are responsible for patient care, education and research. This necessitates unique skills and special working relationships.

(m) Hospitals deal with the problems of life and death. This puts significant psychological and physical stress on all the personnel. The setting and outcome may cause consumers and their families to be hypercritical.

(n) It is difficult to determine and measuring the quality of patient care. There has been progress in determining with quality, but many questions were unanswered and there is disagreement among experts as to how and what should be measured.

(o) One major characteristic of hospital management is the over emphasis on medical care and the overriding of financial aspects of hospital operations. This results in distortion of management principles and their application to hospitals as compared with other undertakings.

(p) The complexity of a hospital is characterized not only by its diversified activities but also by the personalized nature of its services. Each patient is a special product.

**Present Status of Hospitals in India**

Hospitals can be divided on the basis of management, as government and non-governmental. There are more than 3,593 hospitals with 3,89,141 beds which are managed by government. The hospitals that are managed by other non-governmental agencies number 11,800 with 2,94,404 beds. According to health information of India, the country has 266 medical colleges and 11,289 hospitals with 11,20,000 beds admitting millions of patients and giving treatment to an unestimated number of outpatients. These hospitals are categorized according to rural and urban basis. India has more than 2,446 rural hospitals with bed capacity of 57,042 and 10,288 hospitals in urban areas having 4,98,287 beds. There is phenomenal growth in health services from 1951 to 2007. In 1951 there are only 28 medical colleges and in 2007 it rose up to 266. The number of hospitals expanded from 2694 to more than 11,289. As far as hospital beds are concerned the number rose from 1,17,178 in 1951 to 11,20,000 in 2007. Doctors number in 1951 was 61,840 and it is 7,08,043 in 2007. Doctors patient ratio in India is 1:1000.

**Present State of Corporate Hospitals**

Private sector in health care has gained a dominant presence in all the submarkets-medical education and training, medical technology and diagnostics, manufacture and sale of
pharmaceuticals, hospital construction and ancillary services and finally, the provision of medical services. The health care system in India predominantly is catered to by the private sector and a minuscule contribution through external flow. Expenditure in the private sector contributes to 78.05% of total health expenditure, public sector accounts for 19.67% and external flow 2.28%. In totality, health expenditure formed 4.25% of GDP. In recent years, there is growing interest among foreign players to enter India’s healthcare sector through capital investments, technology tie-ups, and collaborative ventures across various segments, including diagnostics, medical equipment, hospitals, and education and training. There are 90 projects during the period of 2000-2006, for a total approved FDI amount of $53 million, and covering a wide range of countries, such as Australia, Canada, UK, US, the UAE, Malaysia, and Singapore. In India, complicated surgical procedures are being done at 1/10th the cost as compare with the procedures in the developed countries. This is increasing medical tourism in India. Some of the weaknesses of corporate sectors include, high treatment cost, conducting unnecessary tests, lack of continuing medical education and research, lack of social responsibility, non-utilization of services of specialized people, specialized in certain area only and uncertain turnover of the employees etc.

**New Environment**

The severe financial constraints and the selfish and flimsy staff relations, demand an entirely new environment for the present-day hospitals. There is a nursing shortage, quality and utilization standards are rising. In these turbulent times, it can be aid that the healthcare environment has significant influence on hospitals. Now-a-days there are many criticisms leveled at the hospital industry such as pricing structure, costs and productivity. Every hospital has to come up with new and innovative ways to decrease their costs while continuing to provide a high quality of care and strong patient orientation. The central theme of the above discussion is that hospital executives have to create and maintain a competitive advantage for their hospital. Some of the strategies every hospital has to adopt include (a) Technology Leadership (b) Quality Leadership (c) Cost Leadership. In this competitive environment, the tradition concept of managing hospital services will not serve the purpose. The application of marketing principles would pave the way for rationalizing and standardizing the services. In addition, the following points justify the application of marketing in hospitals
• Marketing, in stressing the importance of measuring and satisfying consumer needs and wants, tends to produce an improved level of client service and satisfaction.

• Hospitals, in striving to satisfy a set of consumers (patients) or markets, must attract various resources, including physicians, nurses, other employees, volunteers, organizational alliances, funds, and public support. Marketing provides a disciplined approach to improving the attraction of these needed resources.

• Marketing places great emphasis on the rational management and coordination of product/service development, price fixation, promotion or communication, distribution and also the people, physical evidence and process.

Hospital Environment

The Concept of Hospital

Since many health problems require a level of medical treatment and personal care that extends beyond the range of services normally available in the patient’s home or in the office of the physician, modern society has developed formal institutions for patient care intended to help meet the more complex health needs of its members. The hospital, the major social institution for the delivery of the healthcare in the world, offers considerable advantages to both patient and society. For the stand pint of individual, the sick or injured person has access to centralized medical knowledge and technology so as to render treatment much more thorough and efficient. Form the stand point of society, hospitalization both protects the family from many disruptive effects of caring for the ill in the home and operates as a means of guiding the sick and injured into medically supervised institutions where their problems are less disruptive for the society as a whole.

Functions of a Hospital:

Today, a hospital is a place for the diagnosis and treatment of human ills and restoration of health and well-being of those temporarily deprived of these facilities. A large number of professionally and technically skilled people apply their knowledge and skill with the help of complicated equipment and appliances to produce quality for care. The functions of a present-day hospital include (a) Patient care (b) Education and training of Doctors and Nurses (c) Supporting medical research and (d) Support and assistance for all activities carried out by various public health and voluntary agencies to prevent disease and promote positive health
attitudes in the community through health education. Thus the main function of a hospital is to promote the health of the community which it serves.

**Hospital Typology:** Each hospital is distinct in its characteristics as it differs in structure, functions, performance and the community it serves. One can classify the hospitals into different types depending on different criteria such as objectives, ownership, and system of medicine and based on size.

**Objective as Criterion:** The first criterion for the classification is objective. Here the main objective of establishing a hospital is taken into consideration. Some hospitals are set up with the motto of imparting medical education, training and research facilities whereas in some other hospitals, the prime attention is on healthcare.

**Ownership as Criterion:** The Government Hospitals are owned, managed and controlled by the Government whereas Semi Government Hospitals are found acting as an autonomous body with the good exercising remote control. The voluntary agencies hospitals are owned by voluntary organizations whereas the private hospitals are owned by private parties.

**Medical System as Criterion:** According to different systems of medicine classification can be made as Allopathic, Ayurvedic, Homeopathic, Unani hospitals and hospitals of other systems of medicine.

**Size as Criterion:** On this basis, there is variation in the size of hospitals. As such, the teaching hospitals generally have 500 beds which can be increased according to the number of patients. The District Hospitals generally have 200 beds which can be raised to 300 depending on population. The taluk hospitals generally have 50 beds which can be raised to 100 depending on population. The primary health centers have 6 beds which can be raised up to 10 beds depending on population.

**Aspects of the Hospital Services:** The services provided in a hospital differ from one hospital to another. One can classify these services into three categories such as line services, supportive services and auxiliary services. Line services include casualty services, outpatient services, inpatient services, intensive care services and operation theatres. Supportive services are divided into central sterile supply services, diet services, pharmacy services, laundry services, laboratory and X-ray services, nursing services. Auxiliary services include registration and record keeping services, stores, transport services, mortuary services, engineering and maintenance services and security services.
**Users of Hospital Services:** A hospital caters to different segments of the public. These services are essential to every individual in the society. The users are the patients, attendants, students. The users play a vital role in the marketing of the hospital services.

**Environment:** The creation of good organization is necessary for the effective and efficient functioning of the hospitals. The objectives of the hospitals can be achieved only when the organizational pattern is placed on sound lines. While framing the organization pattern for the hospitals, one has to consider internal and external environment.

**Marketing in Hospitals**

Marketing may have many virtues. It can be used by hospitals as a formidable weapon to forge a competitive edge over their rivals or to ensure quality and attract a great number of patients. Laudable as these efforts and qualities are, they will not by themselves guarantee patient satisfaction. The real test of patient’s satisfaction is the answer to the question; has the smile on the patient’s face been restored? If the answer is ‘yes’ the patient is satisfied, and this satisfaction is guaranteed only when his needs and expectations are fully met.

**Why Hospitals Interested In Marketing?**

When patients or clients funds, or other resources needed by the hospital becomes scarce the hospital becomes concerned and receptive to non traditional solutions such as marketing. A second reason why hospitals have become interested in marketing is the impact of the regulatory process.

**The Distinctive Characteristics of Marketing in Hospitals**

Hospitals, whether providing health care or other services, tend to pursue several important objectives simultaneously rather than profits, wide variety of objectives includes; to provide a high quality of medical care to educate health professionals, to provide an attractive atmosphere in which employees can work, to provide home care and rehabilitation services, to provide outpatient services for those without a private physician etc. Therefore the characteristics of marketing in hospitals are different.

**Major Benefits of Marketing in Hospitals**

Hospital in a free society depends upon voluntary exchanges to accomplish their objectives. Marketing is the applied science most concerned with managing exchanges effectively and efficiently. Marketing is designed to produce three principle benefits for the hospital and its users.
The Changing Marketing Paradigm

The healthcare arena is in a constant state of transition, and recent years have witnessed numerous developments with implications for marketing activities. Many of those trends remain in effect and new developments add to the turmoil within healthcare. The factors contributing to this changing environment must be understood to appreciate the marketing the environment and to apply contemporary marketing techniques. Developments in the areas of healthcare, the marketing arena, and technology are all converging to create a new context for healthcare marketing. As a result, many believe healthcare marketing is not just changing but is being reinvented. Dynamic markets are constantly shifting and changing, requiring regular updates to the approach to marketing.

Therefore marketing is a dynamic subject, and a systematic approach is necessary for successfully market the services of hospital. As a first step, the perceptions of different people in the hospital include Doctors, Nurses and Administrative personnel are gathered on product/service, price, place, promotion, people, physical evidence and process of the sample hospitals. The scores have been arrived at by using statistical test of significance known as analysis of variance and by least significant difference test. 

Marketing Mix in Hospitals

Hospitals need to follow a strategic approach for the achievement of their goals. Being a service organization, services characteristics add too many challenges in the marketing of services. The traditional path followed by manufacturing organizations in marketing planning may not be suitable to the hospitals as consumer (patient) behavior and parameters are different. The traditional marketing mix that was developed, keeping in view the goals of marketing, may also be adapted to hospitals. But the hospitals can not satisfy themselves with the use of traditional marketing mix i.e. product, price, place and promotion. Booms and Bitner suggested in 1981, a 7P’s marketing mix model to service organizations later supported by other marketing specialists. Therefore marketing mix for hospitals consists of 7P’s; Product/Service, Price, Place, Promotion, People, Physical Evidence and Process. The objective of marketing mix in the hospital is to put the right service (patient expected/desired) in to the right place (proper location) at the right price (affordable/competitive) with the proper promotion, right people (i.e. Doctors and technicians, who treat and take care of patients) physical evidence (i.e. presenting the service at the right kind of atmosphere ) and the process (i.e. Interactions between the service
provider and patient and what is the process involved facilitating efficient participation in service production and consumption).

Therefore marketing is a dynamic subject, and a systematic approach is necessary for successfully market the services of hospital. As a first step, the perceptions of different people in the hospital include Doctors, Nurses and Administrative personnel are gathered on product/service, price, place, promotion, people, physical evidence and process of the sample hospitals. The scores have been arrived at by using statistical test of significance known as analysis of variance and by least significant difference test.

**Product/Service Mix In Hospitals**

In hospitals most of the products are services and it is an intangible one. It consists of features and benefits that have relevance to specific target consumers (patients). As such, there is a high level of flexibility and opportunity to be innovative in designing a service offer. There are four risks of attempting to describe services in words alone. They are oversimplification, incompleteness, subjectivity and biased interpretation. Hospital consumer generally tends to express the service experience in a simple form. It is often incomplete because the customer experience cannot be translated into words. Differences in attitudes, exposure and ability to participate and perceive make the consumers subjective and biased while describing a service. While designing the service, hospitals have to consider these four risks which influence both the customers and the hospital. Unless the employee of the hospital as well as the customer understand the service properly, it is not possible to produce quality service. Therefore designing new services in hospitals require thinking about processes, people and experiences as well as outputs and benefits.

**Product Mix in Sample Hospitals**

Observations with respect to product/service mix in sample hospitals reveals the following facts.

**Apollo hospital**

The product mix in Apollo hospital reveals that the different departments providing Medical Services & Surgical Services, ICU Services, Pain Relief Services, Emergency Services, Supportive Services, Special Services for patients and their family members, health check-up services, In-Patient Services, Diagnostic & Therapeutic Services, Blood Bank Services And Corporate Services. Medical and surgical services includes Anesthesia & Intensive Care,
Respiratory Medicine, Dental Services, Dermatology, Emergency Medicine, Endocrinology, ENT, Gastroenterology, Surgical Gastroenterology etc. ICU services include Medical Intensive Care Unit, Surgical Intensive Care Unit, Neuron Intensive Care Unit, Cardiac Intensive Care Unit etc. Chronic pain relief services in Apollo includes OP consultation for chronic pain, pain relief treatment etc. Emergency services providing services like Pre-Hospital Emergency Network, Quality Emergency Rooms, Academics Like Fellowship Of Emergency Medicine etc. Supportive services for patients and their family members in Apollo includes pre-operative and post operative counseling for patient and attendants etc. special services like combination of DMARDs & Follow Up, Physiotherapy, Hydrotherapy, Splints, Braces etc, Occupational Therapy & Life Style Modification Service And Early Arthritis Clinic- To +Detect Arthritis In Earliest Stage etc. Health check-up services includes Apollo Master Health Cheq, Apollo Executive Health Cheq, and Apollo Heart Cheq etc. In-patient services includes inpatient accommodation like general ward etc. Food & Beverages services includes assessment of patient diet etc Blood bank services providing services like analysis of any blood group discrepancies etc. and corporate services include preventive health checks, occupational health services, ambulance services etc.

**Care Hospital**

The product mix in Care hospital broadly classified into Medical And Surgical Services, Laboratory Services, Imagine Services, Online Services, Blood Bank Services, Ambulance Services, Emergency Services, Pharmacy Services, Corporate Services. Home Health Care Services etc. Medical and Surgical Services Includes Critical Care Dermatology Emergency Medicine, Endocrinology, Gastro-Enterology Gastrointestinal Medicine General Medicine, Geriatrics And Home Care Medicine Immunology Internal Medicine etc. Laboratory Medicine or Diagnostic Services Includes Bio-Chemistry, Lab Medicine, Pathology, Micro-Biology and Clinical Genetics etc. Imagine services covers Radio-Diagnosis, Interventional Radiology, Nuclear Medicine Radiology and Interventional Neuroradiology etc. Home health care services includes nursing services, general nursing, catheter care, wound care & dressing, injections, intravenous therapy, tube feedings & care, physician on cell, laboratory services; sample collection from home etc. Blood bank services at Care hospital located on first floor near other diagnostic lab facilities. The blood bank works 24 hours and 7-days- a-week. The blood bank operates a transfusion service providing blood for cardiac surgeries and therapy etc. Ambulance
services of Care hospital covers pre-hospital care for all the emergency calls that are received. The emergency services in Care hospital include 24hr in-house cover by residents and specialists of all specialties. The dietary services in care hospital includes meals through room services, breakfast, lunch and dinner apart from morning and evening coffee/tea etc. Pharmacy services in Care hospital provides 24hr pharmacy services in hospital. Further Care hospital providing corporate services, the hospital is recognized for providing quality healthcare to the employees of various organizations. Online services in Care hospital provides assistance to find a doctor, request an estimation of treatment and second opinions from the doctors etc.

**Perceptions of the Doctors**

It is observed from the survey Apollo paying interest in developing and launching new services in the market before their competitors. But in some aspects they are not producing good services in the areas like ICU and Pharmacy etc. They are concentrating especially on maintenance of patient’s case histories, operation theaters, diet supplies, nursing services, patient care aspects, transportation services, reception services etc. Care is doing well in producing services like same day surgeries, ICU services and Pharmacy services when compared to Apollo hospital. Care is not satisfactorily working in the aspects of emergency services, operation theaters maintenance, packaging services, dietary services, ambulatory services, telemedicine services, house keeping services, transportation services etc. Except few on overall two hospitals having same product mix and performing equally.

**Perceptions of the Nurses**

From the survey, it is found that, Apollo is giving importance to same day surgeries, telemedicine services, and ICU services. But they are neglecting development of new services. In Care hospital in providing services like packaging services, dietary services, good operation theaters, ambulatory services, transport services etc they are making changes as per the patient needs. But some of the services are not gaining acceptance from the respondents like emergency services, same day surgery services, telemedicine services, ICU services, reception services, pharmacy services etc. on overall Care hospital stood first as per the opinion of the respondents.

**Perceptions of the Administrative Personnel**

Few services like packaging services, operation theater services, ambulatory services, telemedicine services, ICU and centralized patient services are maintaining well in Apollo hospital. Most of the respondents are not accepting that the services of hospital are attracting the
patients. In case of Care hospital most of the respondents are satisfied well about the product mix of the hospital except packaging services, dietary services, same day surgery services etc. further it is observed that in Care hospital, there are not concentrating in providing telemedicine services. On overall two hospitals are well in product mix.

From the above discussion most of the cases two hospitals having good product mix for marketing their services.

**Price Mix in Hospitals**

The pricing decisions in hospital services are a critical too, as this component of the marketing mix alone determines the revenue of the hospital on one side and the consumer (patient) sensitivity to price would be higher in hospitals on other side. The pricing strategies for hospitals basically depend upon value perceptions of various groups of consumers targeted by the hospital.

**Apollo Hospital**

In Apollo the pricing mix includes three heads: 1. Fees 2. Inpatient charges 3. Third party reimbursement. Most of the services are in Apollo cost based that seeks effective revenue per individual service and allows to recover all or reasonable part of the total cost of producing the concern service. Apollo is fixing this method of prices for third party reimbursement patients. Because in Apollo 40% of the total patients are having third party reimbursement facility i.e. medical insurance. Apollo is providing different categories of rooms for patients depending up on their paying capacity. The discounts are offering to the special groups such as employer groups and senior citizens etc. While fixing the prices of the services, the management of Apollo considering the actual charges made by the hospital, but the hospital is not finalizing those costs as final prices.

**Care Hospital**

Before fixing the prices, Care considering several components to comprise the total cost of a service. Usually the first component is fixed cost, comprises equipment and administrative costs for each procedure, and department overheads etc. The second component is variable costs, which vary procedure to procedure and includes cost of supplies and human service needed for the procedure. Before pricing services Care hospital is trying to know the cost of providing those services and searching for the scientific way of competing and fixing them but not fixing prices arbitrarily or following what prevails in other hospitals in the region. Because the financial
experts of Care hospital think that, in the environment in which hospital how operative, this method of costing and setting charges is not an effective one.

**Perceptions of the Doctors**

In Apollo the most of the respondents believe that the hospital quality of treatment depends on price and only higher income group peoples are coming to the hospital. Further they believe the laboratory charges are reasonable in Apollo. In the case of Care hospital the pricing structure is framing by keeping the patients from lower income people and the respondents believe that the treatment quality will not depend on price. But Care frequently changing the prices according to the market needs. Further Care charging prices at high for conducting laboratory tests. From this two hospitals are almost having similar price mix for marketing their services.

**Perceptions of the Nurses**

In the case of hospital charges, two hospitals are observing the other hospitals for fixing prices. Most of the respondents in Apollo believing that, laboratory charges are reasonable but Care is charging high prices. Majority of respondents opinioned that the Care hospital is gaining attention from the higher income people only. According to the opinion of the respondents, two hospitals are having good pricing mix.

**Perceptions of the Administrative Personnel**

Apollo is fixing prices by keeping higher income people only so the most of the patients are not affordable. But in Care hospital the respondents believe, hospital is fixing charges individually those are affordable. On the other hand most of the respondents opinioned that the laboratory charges are reasonable in the two hospitals apart from, two hospitals are following stabilized pricing policies. Finally it can be concluded that the two hospitals running on similar price mix.

**Place Mix in Hospitals**

Every hospital should consider how it will make its services available and accessible to its target consumers. Therefore place mix is one of the key elements, in the sense that the hospital should be easily accessible to the patients but at the same time should be adequately protected from pollution. Corporate hospitals can distribute their services using the services of doctors and private clinics. Doctors, who have their private practice, work as visiting/consultant doctors for corporate hospitals. They can refer their patients to these hospitals for diagnosis, surgeries etc. other doctors too can refer their patients to corporate hospitals, as they do not have adequate
facilities for specialized services. Corporate hospitals can also use ambulances to offer immediate care to patients in emergency conditions.

**Apollo Hospital**

In Apollo physical access comprises the channels which the hospital using for distributing the health services. Location of the Apollo hospital includes the branches or outlets to operate, size, where located and what are the specialization at each branch they are offering etc, and designing of the facilities. Apollo is utilizing different channels for delivery of health services to the needy. In Apollo the patients now can get the surgery on an inpatient or out-patient basis or in free-standing one-day surgery centers. Apollo offering house visits in some areas where an oversupply of physicians motivates a higher level of service to the patients. Apollo changing channels in obstetrics, some which are not clinically accepted, have moved the birth process out of traditional labor and delivery rooms in to hospital-based alternative birth centers and on occasion in to the home. Apollo considering some important factors before starting the new branch in some other locations, the factors are competition, medical facilities availability, population, transportation, parking facilities etc,. While selecting location of the hospital, Apollo giving importance to the proximity to residential areas.

**Care Hospital**

In order to provide better services and to reach nearer to the needy, Care hospital started its outlets at different places in the city includes, Nampally, Secunderabad, Musheerabad and outside the city includes Visakhapatnam, Vijayawada, Nagpur, Pune, Raipur, Bhubaneswar, and Surat with different bed capacities. As a part of distribution mix, Care providing Care clinics. These clinics are unique offering from care hospital. Through these low cost models, care hospital aims to spell convenience to patient through easy accessibility of a health services just around the corner. Each care clinic is equipped with diagnostic centre, operational with state of art facilities, pharmacy, out-patient departments, apart from the advanced wellness-centers. In addition to the routine checks, care clinics offers disease management programs, wellness programs and allows the patients to choose from more than one thousand health checks.

**Perceptions of the Doctors**

Majority of patients from two hospitals believe that the hospital services still extend some other areas on one hand, and they also responded that the hospitals receiving patients from all the places on other. So two hospitals have to start other branches in some selected areas. It is
observed that the Care hospital is located at central location and nearer to the main road, so it is suffering from pollution but, in this issue Apollo hospital far away from the main road so it is protected from the pollution. It is further observed that in Care hospital very few doctors only working as consultants in some other hospitals comparatively Apollo hospital. In the same way the two hospitals are well noted for reference purpose to the other hospitals and also in two hospitals most of the respondents believing that the hospitals are located at right place. On overall two hospitals are having right place mix.

**Perceptions of the Nurses**

In Apollo hospital few of the respondents proposed that the hospital still extent its services some other places but in Care no respondent opinioned that there is a need to extend its services. It is noticed among the respondents in two hospitals they believe that the hospital is attracting the patients from all the places. As per the respondents opinion in two hospitals there is no problem of pollution and they are located at right place. Further it is observed in two hospitals no respondent providing services in some other hospitals. Two hospitals are having right place mix for marketing services.

**Perceptions of the Administrative Personnel**

Majority of respondents in two hospitals opinioned that the hospital is attracting the patients from all the places. But in Apollo most of the respondents suggested that the hospital has to extend its services to some other places. In Care hospital high percentage of respondents opinioned that, there is no need to extend services of the hospital. Two hospitals are adequately protected from the pollution. But no person in two hospitals providing services at some other places. Care hospital is well noted to other hospital for refer their patients comparatively with the Apollo. Apollo hospital is treated as place time convenient hospital but Care is having some inconveniences. But two hospitals are treated that they are located at right place. As per the opinions of respondents, two hospitals are having similar price mix.

**Promotion Mix in Hospitals**

It is the responsibility of the hospitals to educate and, if necessary, train consumers (patients) so as to make them prepared to use the hospital services efficiently. A well designed promotional programme is of immense help to hospitals to inform, persuaded and train patients to better their experiences. Promotion is the hot topic in marketing of hospital services. By the promotional activities hospitals should be able to communicate the right message to patients and service
seekers. The information can be regarding the treatment and auxiliary arrangements like transport, communication, diet facilities for attendants of the patients, price etc, apart from this, direct promotion includes inpatient-doctor interaction and the care taken by the support staff. Promotion is basically communication. Public relations, publicity, advertising, lobbying, fund raising educational programs are the various devices used for promoting a service, or idea. Some other methods such as word-of-mouth, rumor, gossip, opinion polls and endorsement of opinion leaders. The effective promotion needs surprise. Therefore, anything that is stereotype or imitation should be avoided. It is good to innovate and be creative in promotion.

**Apollo Hospital**

The promotion mix of Apollo hospital based on advertisement of services, promotion of services, publicity of service, personnel selling and public relations. It is observed that the Apollo hospital broadly using media as magazines, news papers, television and posters, singe, skywriting, calendars, cards, catalogs, directories, programmes, circulars, internet etc, for the promotion of their services. For promoting some of their services, Apollo following incentives as part of their promotional plans. These incentives are using some time to create long run response and some times are offered to create an immediate behavior response from the users. The researcher has observed Apollo is using these incentives to fill the empty beds in different departments which haves the seasonal importance.

**Care Hospital**

The promotional mix activities in Care comprising, offering discounts on certain services like Mammography and Osteoporosis screening examinations, nutritional and exercise counseling etc,. It is observed that in Care, cash discounts are offering on some special services only. Care is distributing among special room patients and others in the community beautifully crafted desktop items such as digital clocks, letter openers and scissors with the hospital name super scribed on them. Care hospital giving equal importance to the image advertising and product advertising in their promotional campaign. For this purpose Care preferring electronic media, and web based advertisements. Along with in Care is advertising through news papers, magazines and bill boards, displays, posters, traveling displays, station posters, direct mail advertising etc.

**Perceptions of the Doctors**

In Apollo high percentage of respondents are feeling that the hospital was successfully propagating it services to patients and their relatives but not feeling them selves as direct
promoters. In Care hospital most of the respondents treating themselves as direct promoters of hospital services and also believing that the hospital successfully communicating information about their services. In two hospitals the special programmes are getting attention from the needy. Comparatively special campaigns like heart-checkups, dental checkup at concession rates are getting attention from patients in Care hospital. Respondents in two hospitals are believe that the programmes conducted by the two hospitals like T.V. and radio programs increasing reputation of the hospitals. In brand image point, Apollo hospital is creating strong brand image in the market than the Care hospitals. On overall two hospitals are having similar promotion mix.

**Perceptions of the Nurses**

In Care hospital the respondents are believe that the hospital is able to propagating successfully its services in the market, and they are not feeling themselves as direct promoters of the services. But the situation is opposite in Apollo hospital. Two hospitals are able to gain attention of the needy through their promotional campaigns and also the T.V. and radio programmes getting good response from the patients. Most of the respondents accepted in Care hospital is having brand image in the market for their services than the Apollo hospital. on overall two hospital are having similar promotion mix.

**Perceptions of the Administrative Personnel**

Most of the respondents in Care hospital are believe that the hospital able to propagate its services to patients and their relatives. In two hospitals as per the respondents’ opinion, they are feeling them selves as direct promoters of the hospital services. It is observed in two hospitals, high percentage of respondents opinioned that the hospitals are having brand image for their services. As a part of promotion activities two hospitals are gaining the attention from the market by giving radio and T.V. programmes. On overall two hospitals are having good promotion mix for marketing services.

The perceptions of doctors on marketing mix (first 4 P’s) The P’s entire are positively opinioned by the respondents in two sample hospitals. The mean scores are in the range of 2.34 to 3.10 and 2.42 to 3.01 in Apollo and Care hospitals respectively, on a 5 point scale indicating marketing mix (first 4 P’s) of the sample hospitals is agreeable to the respondents.

The perceptions of nurses on marketing mix (first 4 P’s) The P’s entire are positively opinioned by the respondents in two sample hospitals. The mean scores are in the range of 2.13
to 3.08 and 1.94 to 3.02 in Apollo and Care hospitals respectively, on a 5 point scale indicating marketing mix (first 4 P’s) of the sample hospitals is agreeable to the respondents.

The perceptions of administrative personnel on marketing mix (first 4 P’s) The P’s entire are positively opinioned by the respondents in two sample hospitals. The mean scores are in the range of 1.92 to 2.55 and 1.88 to 2.01 in Apollo and Care hospitals respectively, on a 5 point scale indicating marketing mix (first 4 P’s) of the sample hospitals is agreeable to the respondents.

**People Mix in Hospitals**

Hospitals are people-oriented and people-based organizations. In many cases, the contact employee of the hospital is the service. The employee may be a doctor, nurses, housekeeping staff or any other. Because the employee represents the organization and can directly influence consumer satisfaction, they perform the role of marketers. On the other hand service marketing is about promises, promises made and promises kept to customers. Under people mix, people include Doctors and technicians, who take care of the diagnosis and treatment of patients,. So, it is important for corporate hospitals to attract and retain doctors with excellent knowledge, skills, and also the right attitude. The support and assurance of the doctor who gives personal attention, to a doctor who treats them as commodities and deals with all of them alike. Apart from the technically qualified, support staff like nurses and housekeeping personnel should be well-mannered, gentle, hygienic and meticulous. Because patients should be provided utmost care as their recovery depends not just on the medical treatment but also on the human touch provided by the support staff. In order to provided quality treatment and support services many hospitals run their own medical and nursing schools to train staff according to their requirements. Patients also play a key role in hospital service delivery. For this, apart from maintaining quality staff, may hospitals also conduct customer education programs to enable patients and the attendants to appreciate the value and quality of services. Because it is not possible to have an efficient delivery if the patient is not confident and supportive.

**Apollo Hospital**

In Apollo people mix consists of doctors, nurses, paramedical staff, supporting staff and front office executives etc,. Apollo is managing personnel, by developing and enhancing a service culture systematically. For this the hospital having a human resource department with eminent people in concern field. Apollo is having training system and infrastructure for training the
employees. Some times Apollo is hire specialists for its training needs. Apollo is giving training to the employees basically to meet the objective of: developing and enhancing communication skills and service skills among employees. For this Apollo is conducting training programmes aim at three important skills i.e. technical skills, interactive skills and social skills. But the researcher observed that the training programmes are not continuously organizing by the Apollo hospital. It is observed in Apollo the front line employees are getting high priority in service production and delivery process. Apollo is giving training to the employees in assessing the exact needs of the patients. In process of empowering the patients Apollo is giving required tools to the frontline employees. But here the researcher has observed that there is no proper delegation of authority to serve the customers. They are some times confusing in their work process.

**Care hospital**

The people mix in Care hospital classified as high contact people and low contact people based on the extent of patients contact required for the creation of a service. High contact service people include doctors and nursing staff who are engaged in providing the services to the patients all round the day. The administrative people, supportive service people etc, come under low contact service people. Care hospital is running with a team of Cardiologists and Cardiac Surgeons in the country. Round the clock this hospital made availability of cardiologists, cardiac surgeons, neurologists, critical care specialists, anaesthiologists etc, in the hospital. Nearly 11.12% of all employees in Care comprises of doctors with nearly 4.72% of them being specialists and 3.64% of non-medical staff. The employee cost increased, revenue per employee improved from Rs.7.08 lakh to Rs.8.93 lakh in 2008-2009, indicating an overall increase in productivity. It is observed that Care hospital is suffering with unavailability of trained medical professionals including nurses, paramedical staff etc. Care hospital is having rewarding system for high contact people as well as for low contact people. They are identifying the best performers and rewarding them to the level of their excellence.

**Perceptions of the Doctors**

Most of the respondents in two hospitals are opinioned that the doctors are recruited on the basis of their educational qualifications and experience. In Apollo management is considering their reputation in the hospital industry, but in Care hospital importance is giving for their attitude, next their work experience. High percentage of respondents are accepting in Care,
doctors will deal with the patients alike but on other hand it is observed in Apollo, it is not become possible because of over flowing of patients. Majority of respondents believe that the two hospitals recruiting nurses from reputed nursing schools and importance is giving to the experience in corporate hospitals. Even the supporting staff also appointed strictly on merit basis only. In Apollo the management is very serious about the behavior of house keeping personnel but in Care they are liberally going. On overall in two hospitals the staff is sympathetic towards patients and the hospitals arranging customer awareness programmes for assisting the patients. Among two hospitals, it is observed that the two hospitals having right people mix for marketing service.

Perceptions of the Nurses

The perceptions of nursing staff towards people mix of the hospital reveals that a majority of the respondents in Care accepted that the doctors are having excellent knowledge and skills. But in Apollo it is quit opposite to the Care hospital. On attitude point of view Apollo is better than the Care hospital. High percentage of respondents in Care opinioned that the doctors are not dealing the patients alike. In two hospitals majority of respondents are accepted that the nurses and supporting staff are well qualified and they are playing important role for better recovery of the patients. The house keeping personnel are well in two hospitals in the aspects of their mannerism etc. In arranging customer awareness programmes for enabling the patients Apollo is better than the Care. But in Care most of the respondents are accepted that the staff of the hospital is sympathetic towards patients but not in Apollo. As per the opinion of respondents, two hospitals are having similar people mix.

Perceptions of the Administrative Personnel

In Apollo majority of respondents opinioned that the doctors in hospital working with excellent knowledge than the Care hospital. But in skills and attitude point of view two hospitals are having same opinion from the respondents. No evidence is appeared in the two hospitals about the doctors will not deal the patients alike. In two hospitals majority of respondents agreed that the nurses and supporting staff are well qualified and they are playing crucial role for better recovery of the patients. High percentage of respondents in two hospitals opinioned that the House keeping personnel are well mannered, gentle, hygienic and meticulous. But staff is not supportive towards patient problems in Apollo comparatively with Care hospital. On overall it can be concluded as two hospitals are having good people mix for marketing services.
Physical Evidence Mix In Hospitals

Most of the hospital services cannot be offered without the support of tangibles. All the physical objects are used as evidence by the consumer to assess and expect performance from the hospital. Hence physical evidence plays a critical role in shaping consumer (patient) perception and also expectations. The physical evidence mix in hospital includes all the tangible representation of the service. It is important when consumers have little on which to judge the actual quality of service they will rely on these cues, just as they rely on the cues provided by the people and the service process. Physical evidence cues provide excellent opportunities for the hospital to send consistent and strong messages to the service utilisers. Apart from the location, the ambiance of a hospital is also very important for making a positive impression on patients and their attendants. Which includes interior decoration, lighting and ventilation, attention should also be paid to necessary infrastructure like electricity, water, sewerage, communication and transportation, security etc. the certifications and awards won by doctors of the hospital and the service certificates won the hospital can all be displayed at the reception to instill confidence in the patients. Therefore, corporate hospitals should be very, careful about presenting the right kind of atmosphere, which is both hygienic and relaxing, a large open lawn or garden with a simple layout and comfortable seating arrangement for patients has become essential for hospitals to remove the perceived risk of patients.

Apollo Hospital

The physical evidence mix of Apollo hospital can be described in terms of admission office, signs, patient care room, medical equipment, recovery room, building exterior, employee uniforms, reports and stationary, billing statements, website etc. At patient rooms, there are well marked corridors, the atmosphere becomes even quitter. Room all of them private are arranged in 20-bed pods surrounding a nursing station. Nurses are within 40 steps of any patient room. The rooms them selves having features like multi shelf display area on which patients can put cards, flowers and other personal items. Fold-out, cushioned bed-chairs are in each room so family members can nap or even spend the night. Special attention is paid to the ceilings, colored with light shades given pleasant look. All rooms have windows with curtains and a white board on the wall at the foot of each bed displays important information that patients want to know like the name of the nurse on duty, the date, the room, phone number and other information. But in the case of general wards, the pod design puts nurses are not close to their patients.
Care Hospital

The physical evidence mix in Care hospital can be described in terms of entrance and lobby area, parking area, main public entrance, public waiting area, public toilet facilities, signage system etc. The main waiting area provided seating for the largest estimated number of people who may occupy it at a given time. There is a simple and effective signage system in Care hospital to find way by the patients. For this hospital is using simple signs and figures for easy understanding of patients and visitors. The patients wards are designed with minimum floor area of 300 sq.ft. There is no less than four feet of space between the beds. Sufficient space is allowed for nurses to pass between the bed and the wall. Movable furniture in each private room is provided. The staff following dress code, entire hospital is centralized air conditioned with reasonable lighting facilities and care is taken for ventilation by air-conditioning.

Perceptions of the Doctors

The majority of respondents in Apollo opinioned that the interior decoration of hospital was good. In Care hospital high percentage of respondents accepted that the patients wards of Care was maintaining good in the aspects of lighting, ventilation etc. In providing drinking water facilities, uninterrupted electricity, sewerage two hospitals are gained respondents support. Most of the respondents in Care noticed that the security levels have to improve in the hospital. Two hospitals are good in arranging communication facilities by providing coin boxes etc. Apollo is displaying awards won by the doctors and service certificates at various places but the visitors are not observing because they are not placed at suitable places. But in Care hospital, awards won by the doctors and service certificates displaying at suitable places and they are gaining the attention of the visitors. On overall two hospitals having good physical evidence mix for marketing services.

Perceptions of the Nurses

Most of the respondents are positively responded that, Apollo is making positive impression on patients by its physical evidence mix. In providing drinking water and uninterrupted power supply Care is gained most of the respondent’s acceptance. Lighting, ventilation in patient wards, sewerage is at satisfactory level in the two hospitals. Two hospitals are arranging communication facilities equally but in providing security to the patients Care is better than the Apollo hospital. The awards won by the doctors and service certificates are displaying in Care at proper places to build the confidence of the patients. In providing the transportation services two hospitals
equally gained acceptance from the respondents. On overall two hospitals having good physical evidence mix.

**Perceptions of the Administrative Personnel**

Most of the respondents in Apollo opined that the hospital creating positive impression on patients by their interior decoration. But in Care limited number of respondents accepted same thing. In providing uninterrupted power supply, lighting and ventilation, drinking water facilities and sewerage at patient wards in two hospitals are satisfied maximum respondents. The transportation services of Care hospital gaining support of the respondents but in Apollo hospital these service has to improve. In the same way two hospitals providing good security and having good communication facilities. High percentage of respondents in two hospital opineded that the Awards won by the doctors and service certificates are properly displaying in the two hospitals and they are getting attention of the needy. On overall two hospitals having right physical evidence mix for marketing services.

From the above discussion it is noticed that, most of the cases two hospitals marketing services with right physical evidence mix.

**Process Mix in Hospitals**

Finally, process is a functional activity that assures service availability and quality. The way the physical setting is designed technically and how the functions are scheduled and routed to provide promised services to the consumers speaks of the efficiency of the process. Gronroos has described process as interactive marketing. Interactive marketing take place between contact employee of the service hospital and service consumers. In hospitals services process starts under two broad categories, viz; services for inpatients and those for outpatients. The process for these two services is a little different. The basic process however starts with reporting at the reception at the appointed time and meeting the doctor concerned for diagnosis and treatment. If the doctor says that simple medication is required, the patient can avail of the services as an outpatient. If the doctor says that the patient needs special continuous care and needs to be admitted to the hospital, then the patient becomes an inpatient. The services process in hospitals for inpatients are spread over operation theaters, intensive care units, emergency units, regular wards etc., Administrative work like registration, stores, diet for the in-patients, maintenance of the patient records, security etc, is carried on by the staff assisting the line officers. Apart from the in-house treatment, some hospitals run mobile clinics to provide patients easy access to services.
Providing online consultation is also fast gaining popularity in the west, though in India, where technical awareness is comparatively low, it may take some time for the masses to welcome such innovative concepts. Corporate affairs are managed by professionals specially appointed for this purpose. Affiliated academic institutions educate and train healthcare professional and research institutions concentrate on discovering and developing new concepts.

Apollo Hospital

Keeping in view different types of patients that approach Apollo hospital, the hospital management has instituted several registration centers at different places in the state. The patients, who want to take prior permission may consult these centers and can get appointments for the consultation. At the registration counters, patients’ information is recorded in two files. One is given to the patient and the other file is kept in the office for official use. The patients are called and sent to nurses’ assessment rooms for general checkup of their health, like blood pressure, weight, height etc. Then the patients are taken to the Assistant doctors for further consultation. Basing on the reports, the doctors diagnose the disease or sometimes if required, the patients will be sent for further diagnostic tests. On examining the reports, the patients get treatment from senior doctors. In case of any complexity, which requires for the patients to stay in the hospital wards for close monitoring of the progress of health, the patients have to stay as in-patient in the hospital as per the recommendations of the doctors.

Care Hospital

The process followed in extending medical services to the patients and visitors at Care hospital is simple, patient friendly and time saving. The outpatient, who go to the care hospital directly have to contact department or registration and get the serial number for stipulated to consult the doctor. They may wait in the waiting halls till their time comes. As and when the turn or a patient comes, they may go to the concern doctor’s chamber for consultation. In case of delay in consultation the doctor’s room, the patients may have to wait a couple of minutes at the sub-waiting halls adjacent to the doctor’s chamber. Based on the clinical examinations and gravity of the ill health, the patient may be recommended to join as inpatient. The people visiting the hospital for various other purposes like medical certificates, insurance claims, medical records etc, have been provided with all the facilities in the separate department. To facilitate the easy payment or settlement of hospital bills and to avoid congestion, Care hospital providing 6 cash counters within the reach of the patients and their attendants.
**Perceptions of the Doctors**

Majority of respondents in Care accepted that the bill settlement is easy process but in Apollo hospital most of the respondents believing that it is difficult process. High percentage of respondents accepting in Apollo that they are feeling difficult some times while they are discharging. Two hospitals are not creating any complications when the patient is discharging on emergency situations. Further it is observed that the patients are waiting more time at service counters in Care hospital. In the case of patient waiting time at doctors, Apollo is better than the Care hospital. On overall the treatment process is simple and with in short period treatment is completing in the two sample hospitals. Except some cases two hospitals are running on good process mix.

**Perceptions of the Nurses**

Majority of the respondents in two hospitals complaining that they are wasting time at service counters. The process for discharging the patient is feeling comfortable at Apollo than Care hospital. High percentage of respondents accepting the bill settlement process in the two hospitals, but in emergency conditions patients are feeling difficult for their procedure in Care hospital. In the case of waiting time at doctor most of the respondents are feeling comfortable than the Apollo hospital. On overall the process to get the treatment in two hospitals is good. Among two hospitals except few cases, the hospitals are having good process mix for marketing services.

**Perceptions of the Administrative Personnel**

High percentage of respondents in Care hospital accepted that the length of waiting time at doctors is reasonable. But in Care hospital majority of respondents are not satisfied with the number of service counters. In Apollo, most of the respondents are feeling comfortable for the procedure to discharge the patients in emergency situations. In normal conditions the process to discharge the patients is good in the two hospitals. Almost two hospitals getting acceptance from respondents for simple bill payment procedures. In two hospitals high percentage of respondents believing that the hospitals are not following lengthy and complex process for giving the treatment. Finally it can be concluded as two hospitals are running on good process mix.

The perceptions of doctors on marketing mix (last 3 P’s) The P’s entire are positively opinioned by the respondents in two sample hospitals. The mean scores are in the range of 2.24
to 2.50 and 2.12 to 2.61 in Apollo and Care hospitals respectively, on a 5 point scale indicating marketing mix (last 3P’s) of the sample hospitals is agreeable to the respondents.

The perceptions of nurses on marketing mix (last 3 P’s) The P’s entire are positively opinioned by the respondents in two sample hospitals. The mean scores are in the range of 2.17 to 2.66 and 2.02 to 2.67 in Apollo and Care hospitals respectively, on a 5 point scale indicating marketing mix (last 3P’s) of the sample hospitals is agreeable to the respondents.

The perceptions of administrative personnel on marketing mix (last 3P’s) The P’s entire are positively opinioned by the respondents in two sample hospitals. The mean scores are in the range of 2.03 to 2.34 and 1.81 to 2.42 in Apollo and Care hospitals respectively, on a 5 point scale indicating marketing mix (last 3P’s) of the sample hospitals is agreeable to the respondents.

The statistical analysis (ANOVA) and the conclusions revealed that the 7P’s from the hospitals people side, the responses have given a relative rating of the 7P’s in five out of six cases leading to a particular ‘P’ being strongly agreeable, a particular ‘P’ is just agreeable. Therefore respondents with a long term attachment with an organization can better distinguish the organization aspects than those who just stay for short while and leave.

Conclusions on Patient Satisfaction

Analysis of Patient’s Perceptions

Today hospitals are being recognized as social institutions apart from being curative ones. Now these are considered as patient-focused centers instead of provider focused centers. In these circumstances hospital must strive for maximum patient satisfaction. As the patient satisfaction is the real testimony to the efficiency of the hospital, it becomes imperative for the researcher for the researcher to observe the relationship between the marketing functions and patient satisfaction. In the study, an attempt has been made to find what factors influence the patient satisfaction. In order to find out an answer to the question how far the sample hospitals are satisfying the patient’s needs, the perceptions of patients were elicited.

The schedule of patients is divided into following heads; Admission, Comfort, Food Facilities, Care, Business Office and Discharge.

Perceptions of Patients towards Admission Procedure

The perception of patients in sample hospitals reveals that, the majority of patients in Apollo accepting that the admission can be get with in short period in Apollo but low percentage of patients accepting same thing in Care. But, majority of respondents in Care believing that the fee
for getting admission is nominal. The assistance for getting admission and way of collecting information from patients, two hospitals is following simple methods. Majority of the patients opinioned in Apollo that the hospital is conducting necessary tests before treatment. On collecting extra fees for admission in holidays, majority of the patients in Care is treating as not reasonable. It is noticed that the Apollo is admitting the patients as inpatients without any strong reason and also majority of the patients are thinking that the admission can get in Apollo through recommendations only. On overall patients is expressing satisfaction about the admission procedure in two hospitals.

**Perceptions of Patients towards Comfort**

The opinion of patients about the comfort of two hospitals indicating that the more number of respondents in two hospitals positively responded on the issues of comfortability of rooms, maintaining hygiene conditions of rooms, maintenance of pleasant atmosphere to stay at hospital and providing centralized patient services In the same way two hospitals received satisfactory response from the patients in providing accommodation immediately. It is noticed that the special rooms are better than general wards in Apollo but not in Care. In the same way two hospitals maintaining no other disturbance at hospital premises. Most of the respondents are feeling in Apollo that the expenses are moderate, in the same way they believe that the prices of special rooms are reasonable. On the issue of waiting time, most of the respondents are feeling comfortable in Care. In two hospitals patients are satisfied for, the hospital allowing the visitors at any time. Further it is noticed that no respondent is not accepting that the bed in general ward is better than the special room in two hospitals. On overall two hospitals gained satisfactory result about the comfort of the hospital.

**Perceptions of Patients towards Food Facilities**

The perceptions pf patient states that, most of the respondents in Care are accepting that the food providing at hospital is hygienic and useful for better recovery. Further in two hospitals more number of respondents is accepting that the food is received on time. High percentage of respondents in Apollo opinioned that the dishes at canteen are good. On the issue of way of serving the food Apollo is better than the Care hospital. In Apollo hospital majority of respondents are accepting that the hospital providing good canteen facilities but it is not with in the proximity of the hospital. Finally it can be concluded as the perceptions of patients towards food facilities in two hospitals reveals that, there are some problems in arranging food facilities.
to the patients. On overall two hospitals gained satisfactory result about the food facilities of the hospital.

**Perceptions of Patients towards Care**

The perception of patients about care reveals that the two hospitals are getting majority respondents acceptance on providing good telephone facilities and on behavior of hospital personals. In providing updated information about the progress of patient’s health, Care is having better support from patients than the Apollo hospital. Further it is noticed that in Care hospital, limited number of respondents are complained that the staff demanding illegal gratification tips. Most of the respondents in Apollo and Care satisfied for pleasant stay arrangements by the management. Very nominal percentage of respondents is noticed that there are no facilities to call the nurses in emergency conditions. In two hospitals patients are happy for the doctors showing patience for listening their problems and their friendly nature. Limited number of patients opinioned that the hospital conducting unnecessary tests in two hospitals. On overall two hospitals are satisfactorily providing care to the patients.

**Perceptions of Patients towards Business Office**

The perceptions about performance of business office in the sample hospitals indicating that that the majority of respondents in Apollo hospital are accepting the billing procedure is easy. It is noticed in Care hospital, high percentage of respondents accepting that the hospital authorities are giving information about the expenditure of treatment in advance to the patients. But in Apollo most of the respondents are not accepting this. Two hospitals are having good patient grievance procedure and doing well. In Apollo limited number of respondents complaining that the hospital staff is not cooperative, On overall in two hospitals majority of respondents satisfied with the performance of business office.

**Perceptions of Patients towards Discharge**

The perceptions of patients about discharge in two hospitals indicating that the majority of patients accepting that they will suggest these hospitals to others. Further it is understand from respondents opinion, the discharge procedure in Apollo is simple. In two hospitals very limited number of respondents is complained that there are some hassles while discharging and also taking long time to discharge after the doctor concerned. On overall it can be understood that the two hospitals having simple discharge procedures.
On the whole, it is observed by the researcher that both the hospitals have been successful in promoting hospital services with negligible limitations. This proposition can be substantiated by two aspects. Firstly when 7P’s are compared and analysed in respect of both the hospitals, it is found that they are very close to the standard opinions expressed by the experts. Secondly, the survey report on employees and patient’s satisfaction levels, clearly the statistical results depicts that the opinions expressed in both the hospitals are very close to the scale of ‘Agree’.

In view of these indications, it can be summarized that both the hospitals have shown equal efficiency in promoting their services. It indicates that there is a stiff competition among the hospitals in extending services to the patients and hospital services users. It stresses the need to take utmost care and to have subtle introspection at regular intervals to provide best possible services better than the others. In the absence of these measures, they may have to exit from the market.

Suggestions for Better Marketing of Hospital Services

The following are some of the suggestions made to the marketing managers and policy makers of hospitals. If they are implemented, the present problems in the hospitals may be overcome to a great extent. These suggestions are dealt under two heads.

I. General suggestions.

II. Specific suggestions.

I. General suggestions.

Today’s health care markets have become consumer driven, and there is no exception for hospitals. On the other hand, hospital environment and needs are shifted dramatically, which is characterized by, competition, surplus of supply in the form of mushrooming of hospitals, and nursing homes, diminished demand, informed consumers who demand better standard of service etc,. In these circumstances marketing is an excellent competitive weapon, hospital can use it for promoting their services. But in India marketing and all activities connected with it such as advertising were treating as loathsome and offensive in a hospital set-up. However things are changing in recent years and hospital marketing slowly coming of age in over country still carries a stigma in the eyes of many hospitals in India. In this context the hospital managements
should remember the following facts while preparing the marketing programmes for the hospitals.

- Much of the negative attitude towards hospital marketing stems from the peddler’s or the hawker’s image it conjures up in the minds of hospital managers many of whom think that marketing is just selling. But marketing in hospitals is not selling; it is only one of the several functions of marketing. When a hospital embarks on a marketing programme, it seeks to identify the needs of present and prospective patients and tries to meet those needs by developing appropriate services. It then seeks to provide information about these services and promotes them to attract patients. Advertising is one of the methods that contribute to this effort. Marketing is not creating a demand for some service or other that is not needed; it should not be.

- Today’s patients are better informed and know more about hospitals and their services. In fact, at no time in history have people know so much about health care and medicines as they do today. So they want to be involved in the medical care process. For this reasons, they make their own decisions.

- What the hospitals really concerned with is healthy marketing or the positive aspect of marketing which is result of market research which begins with analyzing the community health needs. It means value based practice is very important. Therefore hospitals then develop services to meet these needs and tell the people what they can offer. Marketing also lays increased emphasis on health care education and wellness programmes.

- It should be remembered, however, that in real practice, hospital marketing is not all that clean, healthy and laudable. What they are really concerned is to offer what sells rather than what is needed, and that business strategy, not quality care, is the overriding consideration in marketing. There are hospitals in which advertising which was once considered unethical in a hospital set-up and which has now become commonplace, is carried out no differently from what is done in trade and commerce; it has often degenerated to selling and is not truthful.

Following are some of the general suggestions made to the managements of the hospitals.

**Strategic Planning and Marketing**

Planning is concerned with the long term and with how a hospital should respond to changes in its external environment in the long term, say, in the next five or ten years. In the context of
uncertainties that existed in a rapidly changing market environment, planning had to be complemented by marketing which is concerned with a much shorter frame, one-to five-years period. While planning identifies broad strategic directions which the hospital should take in the fast changing external environment, marketing deals with specific programmes and end results in order to accomplish the goals of strategic planning.

**Annual Marketing Plan**

Hospitals should prepare annual marketing plans to prepare in advance for facing the coming situations. Following points outline the annual marketing plans which the hospitals can adopt.

- **Situation**: A brief introductory section with key facts describing the background as to what occurred at the hospital and in the community in the previous year from the point of view of how these things have affected or will affect the hospital’s marketing efforts.

- **Mission Statement**: Mission statement of the hospital helps in providing the direction to marketing plan.

- **Marketing Objectives**: Objectives refers to what translates the broad mission statement into workable statements. Objectives should be stated in such a way that performance can be assessed at the end of the year from the point of view of how these things have affected or will affect the hospital’s marketing programme.

- **Target Audiences**: The target group or groups which the hospital is trying to reach should not be addressed or referred to as “all donors” or “all patients.” It means patients are not the only target group which the hospital is trying to reach. There are others such as the physicians, nurses and donors.

- **Market Positioning**: Hospitals have to understand what they want to communicate or what it is or what it is want their target audience to know or remember, or what the hospital stands. This is the most important part of the marketing plan. It provides the necessary directions to marketing efforts and has far reaching consequences.

- **Annual Recommendations**: Hospital should explain how it is going to accomplish their objectives, how it will successfully reach the message stated in market positioning. It should contain specific recommendations for each of the functional areas like research, public relations, media advertising, internal communications (patients and staff), design and graphics and budget.
**Goal Setting**

Marketing goals should be specific and articulate. More importantly, since it is not always possible to attain all the goals at once, they should be ranked in the order of importance, and one or two must given the highest priority. By listing the goals and the suggested services under each of them, they can be listed in a two-column chart according to priority. Then the hospital can concentrate its marketing efforts on high priority goals relegating the less important ones to the back burner.

**Consumer Research**

Hospitals frequently conduct the consumer research; it is the most powerful tool which can be used for successful marketing of hospital services. Before a product or service is planned and introduces, a careful research has to be conducted to identify the needs of the people. One does not just sell something, one sells something to people. Therefore, service planning in the hospital should start with market research identifying market segments (groups of people with some common needs) and then proceeding with a list of services designed to satisfy these needs. This should not do in hospitals haphazardly. It is a continuous process; data should be analyzed and also translated into action

**Customers in Hospital Different**

Hospital should identify, there is a big difference in waiting on a customer in a hospital and in any other organization. In the hospital the consumer is a sick person. Hospital staff often gives the impression that they are unmindful of the fact that many of the persons with whom they come in contact in their work are ill and worried and that often sick people act unnaturally, their relatives and friends are worried and distraught. In unfamiliar surroundings, many of them are confused, tense, frightened and anxious. Some are infirm, some in wheelchairs. At this time a friendly, helpful and caring attitude, a kind word of greeting will not only be reassuring to patients, it will greatly enhance the public relations value of the hospital. The patient will immediately place his trust in the caring hands of hospital staff and assuredly feel that there is no need to be afraid. If he receives this warmth and welcome feeling all the way, the patient will become the hospital’s marketing and public relation agent in the community by his word of mouth.
Hospitals Should Not be out of Touch With Society

Society and the hospitals are out of touch with each other and are not communicating. There is a lot of confrontation and not much communication. Hospital managements convert hospitals into consumer-oriented marketing enterprises. Hospitals will have to adopt the marketing concept with a philosophy that all planning is to be done with the patient needs considered first and foremost. Here hospitals remember the following guidelines.

- Hospitals are created for the sole purpose of serving the needs of people. Their mission is to help patients to get well and stay well. Patients are the hospital’s reason for their existence.
- People have a genuine interest in hospitals; they have some concerns too i.e. the way the hospitals operate and meet their obligations. It is the hospital’s responsibility to gauge and appreciate their concerns.
- When hospitals costs or other concerns get too high or get out of hand, people take the initiative and self-act towards controlling them through government regulations and legislation or by bringing about changes through other means. In India public interest cases are becoming a common occurrence nowadays.
- Hospitals which are unmindful of people’s needs concerns and those which do not listen to their voices or respond to their concerns will fail; but those which are close to the people and communicate with them effectively will grow strong and succeed.

Hospital Wide Participation

Marketing in hospitals will not be successful unless there is organization wide orientation and participation by the entire management team. Patients in hospitals perceive better experiences when organization works together as teams. Due to service organization, jobs which are sometimes frustrating, demanding or challenging. Hospital wide participation reduces the most of the risks involved in service delivery.

II. Specific Suggestions

The following are some of the suggestions made to the management of corporate hospitals for better marketing of services.
Know Your Patient

- Know each one of your patients well including their name, age, occupation, background and the neighborhood come from.
- Have their telephone numbers and addresses. They come in handy, may even be necessary in an emergency.
- Continuously study what your patient thinks of you and about your practice. Observe attitudinal changes.
- Develop a mechanism by which patients can air their problems/complaints
- If some of your patients are not coming back, try to find out reasons for their leaving.

Marketing through Public Relations

There are alternate marketing programmes that maintain image and not require advertising while still reaching large number of people. These programmes are a blend of public relations and guest relations activities implemented by well trained, motivated and dedicated staff that provides friendly, courteous service to patients. In almost every area of the hospital where staff comes into direct contact with the patients, the human relations and patient relations are of utmost importance. This is where public relations and marketing work at their best. Depending on how the staff practices public relations will make or mar the hospital. All other outside marketing activities are secondary, even superfluous and irrelevant. Hospitals have failed to pay attention to this fact which is a key to their success.

Marketing Tools for Hospitals

The following are some of the tools which the hospitals can use for marketing of services.

- **Clean and Hygienic Hospital**: A clean and hygienic hospital has a tremendous psychological impact on the patients and visitors which immediately sets for them the overall impression of the hospital. For this good house keeping is an asset and a powerful public relations and marketing tool which has a direct relationship with the reputation and prestige of the hospital.
- **Food Services**: Patients judge the hospital by the personal care and attention given to them when they are hospitalized or when they visit the hospital, and by the quality of food provided to them. It is the responsibility of the hospital to provide to patients and
staff scientifically prepared and nutritious food, and in the case of patients, diets aimed at specific disease conditions.

- **Linen Service**: Imperative to good patient care is an adequate supply of clean linen sufficient for the comfort and safety of the patient. Clean linen helps in maintaining a clean environment which lends an aesthetic significance to patients. It is a vital element in providing high quality medical care. The other aspect of it is the personal appearance of staff who attends on patients. Pleasant, neatly dressed employees in fresh, neat uniforms do much to sell the hospital to the public.

- **Emphasis on Professionalism**: Everything the work, attitude to work, behavior, appearance and dress is professional. Public relations is greatly impaired if staff are indiciplined and patients and visitors find them giggling, gossiping, engaged in conversation while patients are waiting, or occupy themselves with reading newspapers, magazines or story books, leave their place of work or crowd in one place away from their place of work.

- **Well Informed Staff**: Well informed staff is very effective public relations officers of the hospital. To say “I don’t know” to an enquiry about any aspect of the work of the hospital is a pretty dumb thing to do. The patients do not know what sickness they have and which specialists they need to consult. Further visitors make enquires on a wide range of subjects about doctors, specialists, their outpatient and operation days, their working hours, various doctors specialties, what those specialties mean (e.g. cardio-thoracic surgery, gastroenterology, etc.) Most of the enquires come to the telephone operator or directed to the receptionists or the enquiry desk. All staff should be given training and orientation and kept informed of every important aspect of the hospital work.

- **Code of Conduct**: For the smooth functioning of the hospital, management must formulate a code of conduct for employees, and put on record their duties and obligations. These may be part of what are called employees service rules, standing orders or work rules which many hospitals in our country have.

- **Telephone Etiquette**: The telephone is one of the most effective marketing tool on which the reputation of hospital rests. The way in which a telephone call is answered has an important psychological effect on the caller. A prompt connection, after the first ring, whenever possible, and a pleasant voice make the caller feel immediately that he is
dealing with an efficient, vibrant and dynamic organization. If the telephone is not answered promptly, and if the voice behind it sounds bored, tired and slurred, a negative impression is created.

- **Guest Relations:** Unlike in the earlier days when hospitals were judged by the quality of medical services they provided, they are now judge on the quality of service they give, i.e. personalized service rendered by courteous, caring and friendly staff. All staff is given orientation and training in guest relations.

- **Patient Guide:** one of the good public relations exercises which every hospital should endeavor to carry out is the preparation of a patient information book, variously called patients and visitors guide, patient handbook. Because ask any patient or visitor to a hospital, especially in a sprawling and multistoried building, what his most annoying or frustrating experience is. He will tell us that it is lack of information he needs or his attempt to knock on every door to get information.

- **Some Patient Irritants:**

  There are many things which irritate and irk patients and visitors rather than make their experience pleasant and wholesome. There is no doubt that public relations are severely damaged. Following are some of the patient irritants that impair public relations in hospital. Hospital managements take care about these aspects.

  - Hospital way finding systems often confuse and anger patients and visitors alike. People who come to hospitals are already under a tremendous amount of stress and the last thing they need is the problem of finding their destination through the complex labyrinth of hospital buildings which are often devoid of proper directional signs and graphics.

  - Patients reporting to diagnostic tests are sometimes confronted by mazelike layouts which have signs in physician’s language. For example, ophthalmology, oncology, otolaryngology, diagnostic or therapeutic radiology, etc. which lay persons do not easily understand.

    o **Suggestion:** Hospitals should realize that working out an effective signage systems is an art. It takes concerted effort to select appropriate terminology and placement. The system should be supplemented by visual symbols, and directory of floors and rooms, rooms should be numbered. All staff should be
trained in how to give directions. An effective and easy-to-follow directional signs should be liberally provided so that patients and visitors can go to various places without help.

- One of the most frequently heard criticisms against any hospital is the prolonged and seemingly interminable waiting a patient has to do at various stages of his visits to the hospital. It may happen in front of the registration, at the doctor’s office, at the cashier, the laboratory, pharmacy, for and in between appointments and admitting.
  - **Suggestion:** The large number of patients attending the outpatient clinics is not always the reason that makes people wait. There are other reasons such as inefficient and inadequate staff, cumbersome and time consuming forms and procedures, poorly planned and designed space which has not taken into account circulation, work flow and traffic flow resulting in a criss-cross traffic, extra steps and avoidable additional time. Hospital managements should study the problems and remedy them.

- Many of the patients who go through admitting are physically incapacitated and apprehensive. They and those accompanying them are in a state of mental stress. Delay in admission can cause them emotional trauma. Admitting function should take place in a pleasant and comfortable environment in which the patient is assured of privacy and individual attention
  - **Suggestions to Make Admitting Function People Friendly**
    - The staff impressions are crucial; they may be the lasting ones too.
    - Make eye contact with the patient quickly, and maintain it as long as he/she is with you.
    - Greet the patient in a friendly manner and with a smile. For this the employee should be in the right frame of mind.
    - Asking open ended questions such as “May I help you, Sir?” Create a relaxed, friendly atmosphere and build up a rapport with him/her.
    - Use the patient’s name as soon as we have heard or read it, and continue using it. A person’s name is important to him/her.
    - Employees introduce himself to the patient and tell job and job title.
    - Don’t criticize him/her or find fault with him/her.
- Be courteous and friendly in speaking. Be sensitive to his/her problems and show empathy.
- Use correct body language, facial expressions and gestures that will demonstrate the employee friendly nature.
- Employee should remember to keep contents of the patient’s medical records relating to his/her illness and care confidential.
- Tell the patient about the hospital services and what care and services to expect for his/her illness. But don’t oversell the hospital.
- Encourage him/her to ask questions and answer them with interest.

**Service Costs are to be Regulated**

Medicine is not mere business. It is an honorable profession with its code of ethics and a statutory body called medical council of India to uphold the dignity of the medical profession. But unfortunately these bodies are inactive and ineffective in curbing irrational practices and malpractices. Somehow, the prevailing high treatment costs are to be brought under control. For this reason, common man is not in a position to go to these corporate hospitals. Some of the strategies to curb the high treatment costs include

- **Pricing Strategy**: Pricing is a critical strategy for the hospital to examine in its efforts to formulate successful competitive strategies. The authorities can initiate different prices for different buyers for the same service. Through this mean the poor could be protected.

- **Increase in Non-Operating Revenue Strategy**: All corporate hospitals should concentrate more on generating non-operating income either from contributions or investment income from reserves. Hospitals need to establish funded depreciation policies and place more emphasis on developmental programmes, so that they can reduce the treatment costs.

- **Financing Strategy**: Administrators should think rationally while taking debt from financial institutions. It does not mean that the use of debt is to be avoided but rather the excessive debt should avoid. These hospitals should carefully review new financing to ensure that the return from debt financed assets is adequate to cover capital costs.

- **Diversification Strategy**: There are relative merits of diversification strategy within the hospital industry. Diversification in a hospital includes home healthcare, ambulatory
surgery, outpatient diagnostic service clinics, so that they are able to accomplish this with lower costs.

- **Differentiation Strategy**: It is the strategy of differentiating the service offered by the hospitals. It should be unique. Approaches to differentiation can take many forms, such as technology, features, patient service, and networking. This increases the loyal patients and results in increment in number of patients. With this the authorities can reduce the costs.

- **Market Share Strategy**: It has been proposed by many to be a strategy for success in hospital business. Greater market share is believed to provide greater pricing liberty and better opportunities for economies of scale.

- **Investment Strategy**: Hospitals that employ less investment generate better financial performance. Hospitals should closely evaluate new capital expenditures.

- **Cost Leadership Strategy**: The advantage of lower costs which were enjoyed by the industries now can be attributed to healthcare settings. This require aggressive construction of efficient scale facilities, vigorous pursuit of cost reductions from experience, tight costs and overhead control, cost minimization in all the areas. As cost reduction is a critical factor in improving return on investment, the administrators have to concentrate in this area.

### Utilization of Services of Specialized People

According to the charts, the corporate hospitals are having well knit groups of people to look after all works. But, there are separate managers for finance, personnel and marketing, final decisions are being taken by managing directors alone. It should be stopped immediately. The hospitals have to utilize the services of specialized people for the development of the hospital to the fullest extent.

### Creation of Social Responsibility Feeling

The authorities of corporate hospitals should feel responsible for the society and they have to make arrangements to serve the poor and to participate in national health programmes for major diseases like tuberculosis, malaria, leprosy etc. and should co-operate with the government. The authorities should cultivate the habit of participation in educational activities.
Establishing Norms for Treatment

Unnecessary surgeries and unnecessary laboratory tests to be eliminated. This is possible by establishing norms for treatment. Guidelines are to be created to curb these nefarious practices. These hospitals should be made answerable to a medical audit committee.

Creation of Atmosphere for Continuing Education and Research

A monitoring board is to be constituted for creating atmosphere for continuing education and research. The hospital authorities should not take the activity just as a business. Research is having utmost importance because they have to incorporate latest knowledge in their day to day operations.

Establishment of Media Relations Policy

Every hospital, regardless of its size, location and whether or not it has a public relations department, must develop and enforce an official policy for dealing with the press and the kinds of information that may be released. The policy should specifically state who speaks for the hospital, whether the chief executive officer or the public relations director, or any other, and in their absence as during the night when quite often accident victims are admitted, who may be called to make a statement to the press. All those who are required to make statements to the media should be familiar with the official policy and the procedure laid down therein.

Establishing Centralized Patient Service Centre

One way of providing friendly patient service is to set up a centralized patient service centre and what in the business world is called telemarketing which is becoming increasingly popular all over the world. It is a marketing system which combines telecommunications technology with management information system for marketing hospital services. It offers patients a direct line to a trained, well-informed and knowledgeable representative of the hospital with immediate access to any information they seek.

Development of Relationship Marketing

Relationship marketing is the process of getting closer to the customer by developing a long term relationship through careful attention to customer needs and service delivery.

A focus on customer retention:

- An orientation towards product benefits rather than product features;
- A long-term view of the relationship;
• Maximum emphasis on customer commitment and contact;
• Development of ongoing relationships;
• Multiple employee / customer contacts;
• An emphasis on key account relationship management; and
• An emphasis on trust.

All of the techniques are helpful in maintaining good relations with hospital services utilisers.

**Technological Developments**

Hospital must acknowledge the technological developments to survive in this competitive world. Today, the availability of data has increased dramatically (although some notable gaps still exist), but the real advance has been in the ability to access, process, manipulate, and use data for marketing purposes. Information technology has emerged as an important force not only for operational aspects of healthcare but also for marketing. Once considered a necessary evil at best, progressive hospitals have come to see the potential that IT offers. Far from being a liability, information management should be considered a valuable asset for the organization.

Information technology allows the hospital to

• Track trends and project them into the future;
• Create “what-if” scenarios to test service offerings, pricing, and location options.
• Identify patterns in utilization that can lead to the specification of opportunities (or threats);
• Determine the hospital’s position within the market (especially vis-à-vis competitors); and
• Identify opportunities that exist within the marketplace.

**Direct – To - Consumer Marketing.**

Direct-to-consumer (DTC) marketing involves promotional techniques aimed at the end user, targeted to specific customer segments, and customized to the greatest extent possible. The DTC movement is gaining momentum in healthcare as the industry becomes increasingly consumer driven and the ability to target narrow population segments is refined. The trend toward DTC advertising is driven by a number of factors. Changed regulations within the pharmaceutical industry are a major contributor to this trend. The introduction of defined contributions that allow increased consumer latitude in choice of benefits has affected health plans, and managed
care organizations are attempting to reposition themselves in the eyes of the consumer by offering customizable menus of services.

**Database Marketing**

Database marketing is a well-established component of marketing in virtually every other industry, health professionals have been slow to adopt this methodology. The failure of healthcare to take advantage of data–oriented approaches has limited practitioners’ competitive potential. Today, however, technological advances make it easier than ever to take advantage of these techniques.

**Customer Relationship Marketing**

The most important aspects of a true CRM initiative lie in how the organization as a whole defines its customers, identifies and segments their needs, and organizes around serving them in the most efficient and effective manner possible. Hospital services marketers should first identify what goals are most important to the organization, and these should guide the internal planning and implementation efforts. Some of the more common goals and objectives for developing and implementing technology-driven customer relationship programs include

- Improving customer service and satisfaction;
- Increasing profitability;
- Reducing the number of negative customer experience;
- Allocating resources more efficiently;
- Reducing the cost of managing customer interactions;
- Attracting and retaining customers and prospects;
- Staying in front of customers and building stronger relationships over time; and
- Improving clinical outcomes.

**Internet Marketing**

The Internet Marketing has radically transformed the worlds of marketing and healthcare. Although healthcare organizations were slow to jump on the Internet Marketing bandwagon, recent years have seen a surge of interest in the use of the Internet for a wide range of marketing activities. Hospitals have to create websites because this has become their primary interface with their customers.
Healthcare website has generally moved beyond static marketing information and corporate descriptions and has introduced a deeper level of service information, health content, and interactive features. Most, however, are not truly integrated with their other marketing efforts or other IT applications in the hospital. A small number of health systems are pushing customized health information and medical records out to consumers, allowing e-mail communication with physicians, and performing actual disease management online.

**Conclusion**

Of late, the hospital management has gained prominence the world over. The management of a hospital is found significant to deliver services to the society. For a successful marketing of services, it is essential that the concerned organization is professionally sound. This helps the hospital in many ways, such as an increase in the organizational potentials to show excellence, a strong base for serving the poorer sections and a favorable nexus for making it an on-going process.

The first and foremost task before a marketer is to satisfy the users by making available to them the quality services. We cannot deny the fact that in the Medicare services in addition to the medical aid, a number of other factors also play a significant role. If the doctors and nurses are found soft, sympathetic, and decent to the patients, the time-lag for curing a patient is minimized fantastically. Of course the medical aid play a pivotal role but the supportive services also play an incremental role without which the duration of treatment is increased considerably. In the Indian perspective, the core medical personnel lack this dimension. By marketing Medicare services, we engineer a strong foundation for both i.e. the best possible medical aid and a personal touch-in-service.

By marketing medical services we mean making available the Medicare services to the users in such a way that they get quality services at the reasonable fee structure. The marketing principles focus on making available the services even to those segments of the society who are not in a position to pay for the services.