Chapter 3.0 – Methodology

Statistics needed for this study will be gathered from the subjects by a structured questionnaire. These questionnaires are pre-designed and pre-tested in a small group of 23 respondents. Patients’ perceived satisfaction was measured by the service quality scales.

Questionnaire was used to carry out this survey research. The questionnaire was adapted from Emin Babakus, and W. Glynn Mangold. (1991). Service quality’s 5 dimensions were used to measure patient satisfaction.

The questionnaire contained 3 sections whereby section 1 has 22 questions. Overall customer’s satisfaction will be assessed in section 2 by two questions. While positive word of mouth is a new and popular concept in health care service research. There will be 3 questions gauging patients’ opinion on the positive word of mouth concept in section 3.

The questions were arranged into the following seven sections, whereby each section has few statements:

1. Tangibility (questions 1-5)
2. Reliability (questions 6-10)
3. Responsiveness (questions 11-14)
4. Assurance (questions 15-18)
5. Empathy (questions 19-22)
6. Overall customer satisfaction (questions 23-24)
7. Positive word of mouth (questions 25-27)
In responding to these sections, respondents were asked to use their experience as a customer of the hospital from the point of service and care received and also the experience on timely and accurate consultation provided by the doctors.

The questionnaire set also comprises of basic demographic items. Meanwhile this questionnaire will be given randomly at private and public health care centre, therefore the questionnaire is prepared in dwilanguage. This is to ease all level of academic background individuals understanding.

The systematized close-ended questionnaire questions were prepared to be surveyed among customers of the public hospitals and private hospitals. Participants' privacy was guarded as to respect their self-rights and privacy because this is one of the important research ethics.

Initially, verbal consent will be obtained from patients before they take part. It means that they were informed precisely what they will be asked to do before they agreed to take part. Patients were communicated that this study research was for academic purposes only.

3.1 Research Approach

Creators of SERVQUAL have said that SERVQUAL "can be tailored or enhanced to fit the features or study requirements of a particular organization." (Parasuraman, Zeithaml, and Berry 1988). So, a pilot study of SERVQUAL was
carried out before the actual data gathering was started, this is to be sure that this questionnaire was modified to the requirements of a health care environment.

Modifications were made to the questions according to the requirement of the hospital services and the capability of patients to respond the questions without misunderstanding the actual meaning.

Based on the pilot study result, unclear or recurring items were either deleted or reworded. The pilot survey was also conducted to ensure the scales used in the questionnaire for the final stage of the data collection is clear and easily understood. Quantitative approach is chosen to achieve the purpose of the study.

The questionnaire was created according to Likert style five point rating scale (i.e. 5 strongly disagree to 1 strongly agree) was produced and used to look at both public health care and private health care.

3.2 Selecting Sampling Method

A total of 50 hospitals including public hospitals and private hospitals were randomly selected in Malaysia for this study. 10 to 15 individuals or patients from each hospital were subjected to the survey after obtaining verbal consent.

3.3 Data Collection

It is impossible to study a group of people of interest through a market research study due to the restriction of resources, time and reluctance of the
patients from each hospital to take part in the study. Therefore for the use of this investigative study, the "convenient random sampling" method was employed to collect the facts as ease of access and support were the most important considerations.

Over-all 450 survey questionnaires were distributed. The quantity of pleasingly finished questionnaires returned was 369, whereby giving a response rate of 82 per cent (82%).

3.4 Data Analysis Techniques

First of all, normality test was carried out to ensure that the data is robust and normal. With that, it was decided that parametric analysis technique could be carried out.

T-test analysis method is used to measure the service quality level in Malaysia. T-test is used to examine the important differences between two sets of scores.

Correlation is used to evaluate the influence of 2 variables on each other. In this study, Pearson's coefficient was used to evaluate the correlation between service quality dimensions and patient satisfaction. The same test was used to gauge the influence of patient satisfaction on positive word of mouth.

Finally, multiple regression was used to evaluate whether patient satisfaction mediates the relationship between service quality and positive word of mouth. Multiple regression was carried out by testing 3 hypotheses.