

Factor Influencing Consumer Decision Based on Customer Satisfaction in Credence Services: Success Key for Service Provider

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Abstract

Purpose- To reflect the method required to reach such a decision, academics have created the disconfirmation model in the pursuit of fulfilment. Through the application of product-based research, this model has developed. The viability of such a paradigm in the context of services has not been investigated. The application of the disconfirmation model's elements and the connections between them are in doubt. In this research, we looked at the variables that influence the consumer's choice of customer satisfaction in credence services, with a focus on the service provided by the service provider and the perception formed while using the services.

Design/methodology/approach – 300 patients or the relatives of these patients participated in the study, and their observation for a variety of credence services was examined. The responses were gathered from the consumers using a structured questionnaire, and the question regarding the services used & other information which mostly contributing for selecting the service provider was undertaken during the survey.

Findings – The current study aims to evaluate the disconfirmation model's relevance to the services environment as well as the affective extension put out by other researchers. According to theory, affect has a direct positive impact on performance reviews, customer satisfaction, and plans for return business. Disconfirmation is thought to directly improve customer satisfaction with the service experience. The results demonstrate that more customer offerings boost consumer happiness, which increases the likelihood of selection when service providers are being reconsidered. However, when the creativity and knowledge of the consumer are paired with the dependability of the provider, a decision-making offering is produced. Sovereignty is the most important source of credibility.

Research Limitation/implications- The results of this study are based on the regions of Delhi & Noida, Ghaziabad, Gurgaon, Lucknow, and Barabanki. Other past research have suggested other techniques for boosting satisfaction. Further research would be helpful to determine whether hospital treatment efficiency and consistency have a substantial impact on patient satisfaction.

Originality/ Value- In the current service environment, disconfirmation's impact was minimal compared to product-based uses of the model. The only thing that affects performance ratings significantly is affect. The model's considerable affective influence may be caused by the nature of the services. The study's conclusions are original in this field of study and take into account the value of a credibility service when selecting a service provider for the next round of options.

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1. Introduction

The idea of engagement has drawn significant attention from a variety of academic fields, including information systems, corporate management, marketing, and other social sciences (Alford, 1996; Ali, 2016). In marketing-related research, some aspects of customer interaction are especially examined with reference to brands, organizations, product management, and brand communities. Realizing sales and marketing goals is influenced favorably by customer engagement (Asnawi et al., 2019). However, there isn't much agreement on the definition, scope, and operationalization of the idea of customer involvement. The relationship between brands and customer relations has also been explored in regards to customer involvement (Batbaatar et al., 2017). Studies' contexts and conceptualizations of customer engagement, as well as potential antecedents, have varied. Thus, it can be safely inferred that the definition and understanding of the idea of customer involvement need to be improved (Carlin et al., 2012; Chocarro et al., 2018). Customer loyalty is a key goal for strategic marketing strategy and serves as a crucial foundation for creating a long-lasting competitive advantage. According to several academics, client loyalty and business performance are positively correlated (Fatima et al., 2018). Loyalty among customers increases the worth of a company and lowers operating expenses (Goel & Srivastava, 2018). Reduced time is required when businesses look for new clients due to increased value and cost savings. Credence services are distinguished by a high degree of knowledge asymmetry, in which the service provider establishes the needs of the clients (Hamilton et al., 2013). Health services are under the category of credibility products or services since it is extremely difficult or impossible for the user to judge or access them, even after using them. Few research have examined patients' views of healthcare quality in the setting of private healthcare in India, despite the acknowledgment from international experts.

Recently, quality control has grown to be an essential part of providing healthcare services globally (Kumar et al., 2018). Nelson claimed in 1970 that goods are evaluated based on their characteristics and any traits that can only be seen after a purchase (i.e. experience qualities). This chapter gives an overview of how Indian customers assess service quality and suggests improvements that could increase customer satisfaction.

To include all the necessary material, this paper is primarily organized into seven subsections, which are as follows:

- Introduction
- Conceptual background and hypotheses
- Methodology
- Analysis & Findings
- Discussion And Conclusion
- Implications of the Study
- Future Research & Limitation of the study
- And reference & Annexure

2. Conceptual background and hypotheses

There are two aspects of loyalty that are mentioned in many definitions: the behavioral aspect and the attitudinal part (Agrawal et al., 2019). Customer repeat business is what researchers refer to as behavioral loyalty, and they typically gauge this element using

observational methods. Both the continuation of the relationship and the propensity to stay in the relationship are positively impacted by attitude loyalty (Al-Abri & Al-Balushi, 2014). Loyalty is the commitment of the customer to uphold a connection and a devotion to regularly purchase the good or service. (Al-Damen, 2017)

In the healthcare industry, collective decision-making based on consumer choice power is highly ambiguous and gives patients little room for individuality in their decisions (Andaleeb, 2001). The health care structure depends upon the affordability, efficiency, availability, feasibility and other so many factors (Voorhees et al., 2017). Consumer satisfaction is recognized as an important parameter for assessing the quality of patient care services. (Bejarano, Green, & Rassenti, 2017). It is anticipated that satisfaction with the providers' attitude toward these services would have an impact on the prognosis and course of therapy.

This study will aid in our understanding of customer evaluation criteria for service credibility through evaluation of their service experience (Voorhees et al., 2017). There are several reasons why this study paper will be beneficial. Accessing health care can be quite challenging at first, and in order to evaluate these intangible services, all of the understandings are being offered to the consumers in order to identify convincing factors during the assessments. We would also succeed in determining the relative importance of the variables that consumers might use to judge the quality of the assurance services.

In order to boost consumer impression toward holding the decision in favour of the service provider with service encounter, service providers must deliver better services. We have put up the following theories.

H1. Preference for better service is always high for Consumer which positively associated with Efficiency in the treatment

H2. Credence service attainments is always influence by Consistency in treatment with in-patient

3. Methodology

The study sought to ascertain the likelihood that consumers would think twice about the service provider when making a subsequent purchase. In order to complete the project, data was gathered using a random technique, face-to-face interviews, and a survey in the northern Indian city of Lucknow. The city was chosen because it is the capital of Uttar Pradesh, a major metropolis, and a "A" category town, therefore the sample represented both the upper and middle classes. The data was gathered from the respondents using a structured English-language questionnaire using measures that had already undergone testing. To collect the responses, a random sample technique was used. Because it was impossible to obtain responses from every patient, convenience sampling was used in this study to gather responses from outpatients. To reduce the chance of an answer recording error, the questionnaire was changed to electronic format. The declaration was mentioned clearly in the questionnaire that the information captured during the interview is purely for research purpose and your information will only be used for educational purposes, and you have the right to end the interview at any time if you don't want to take part in the survey or give out any personal information. The respondents were not given any financial incentives or gifts of gift cards, and everyone who took part in the study did so voluntarily. A total of 300 responses from the study were recorded and included in the analysis.

4. Measures and Analysis

When creating the data collection instrument, similar scales that have been tested and have been used in literature with a similar context were employed (Hsieh, Chiu, & Chiang, 2005). To get the result, many data analysis methods have been applied. Frequency distributions have been used to check for data entry errors (e.g., unrecognized or missing codes) and to acquire descriptive statistics. The same scale was used to measure (Ekelund, Mixon, & Ressler, 1995) subjective knowledge. The scale provided by (Lemon & Verhoef, 2016) and was used to measure the social outcome confidence (Mortimer & Pressey, 2013). We examined intentions rather than actual behaviours during the trial. Additionally, we discovered that some researchers had previously applied a similar methodology (Utkarsh, Agarwal, & Medhavi, 2019). The respondents' levels of agreement and disagreement were gauged using a 5-point Likert scale, where 5 equals "strongly agree." The number 1 denotes "strongly disagree." To make sure the questions were clear and the survey's structure was unambiguous, a pilot study was carried out with a sample of respondents. To make the questionnaire easier to read, some small corrections were made to the toll. The questionnaire was rolled out among respondents after few minor adjustments, in order to record the actual response. Cronbach's alpha reliability analysis was carried out to evaluate the data's dependability (Ekelund et al., 1995) and all scales' coefficients were found to range between 0.7 and 0.9. (Table 1). Maximal likelihood estimate and a test of the measurement and structure model were performed using structural equation modelling. The proposed hypotheses were initially examined using a measurement model that also assessed the fitness model and parameter estimations. Software programmes like Analysis of Moment Structures version 23 and the Statistical Package for the Social Sciences (SPSS) version 23 were used to analyse the data.

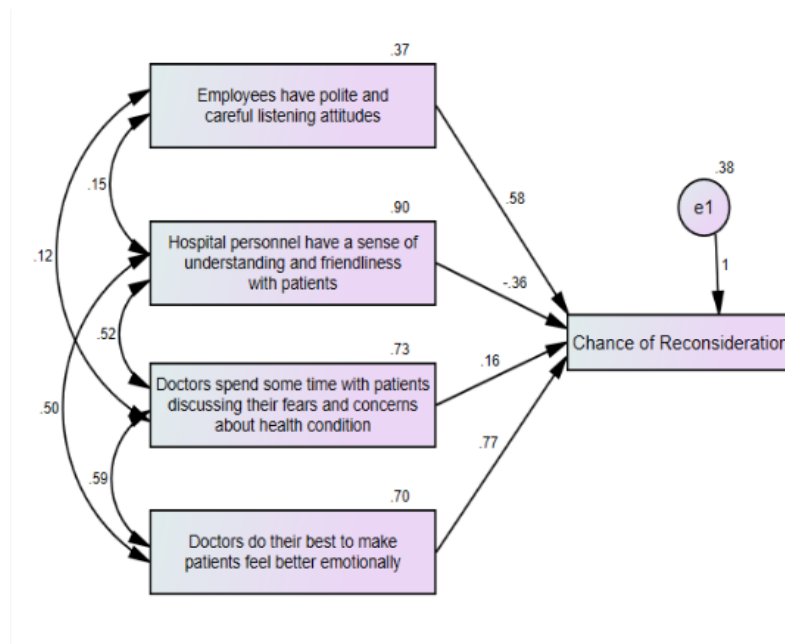


Figure 2 Consistency in treatment (Source: Authors Survey Responses)

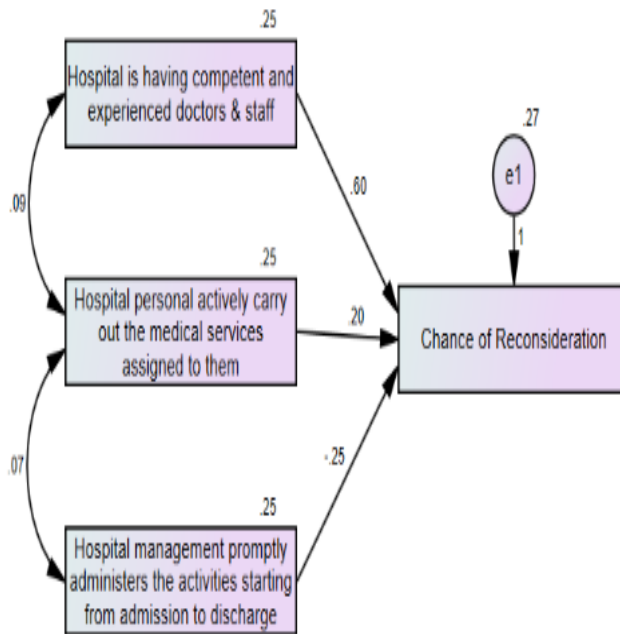


Figure 3 Efficiency in treatment (Source: Authors Survey Responses)

Table 1: Results of Reliability Statistics (Source: Authors Survey Responses)

| Item Statistics | | | |
|--|------|----------------|--------------|
| | Mean | Std. Deviation | N |
| Reliability Statistics | | | 0.776 |
| The employees of the hospital have polite and careful listening attitudes | 3.97 | .606 | |
| The hospital personnel have a sense of understanding and friendliness with patients and accompanying persons | 3.87 | .930 | |
| Doctors of the hospital spend some time with patients discussing their fears and concerns about health condition | 4.33 | .839 | |
| Doctors do their best to make patients feel better emotionally | 4.32 | .837 | |
| Chance of Visit again | 3.81 | .881 | |
| Reliability Statistics | | | 0.67 |
| Hospital is having competent and experienced doctors and staff members | 4.56 | .798 | |
| Hospital personal actively carry out the medical services assigned to them | 4.51 | .601 | |
| Hospital management promptly administers the activities starting from admission to discharge | 4.55 | .899 | |
| Chance of Visit again | 4.15 | .636 | |

Table 2: Bootstrap for Coefficients (Source: Authors Survey Responses)

| Model | B | Bootstrap ^a | | | | |
|--|--------|------------------------|------------|-----------------|-----------------------------|--------|
| | | Bias | Std. Error | Sig. (2-tailed) | BCa 95% Confidence Interval | |
| | | | | | Lower | Upper |
| (Constant) | -1.095 | 0.044 | 0.434 | 0.01 | -1.945 | -0.153 |
| The employees of the hospital have polite and careful listening attitudes | 0.579 | -0.004 | 0.084 | 0.003 | 0.412 | 0.739 |
| The hospital personnel have a sense of understanding and friendliness with patients and accompanying persons | -0.358 | 0.004 | 0.04 | 0.003 | -0.473 | -0.264 |
| Doctors of the hospital spend some time with patients discussing their fears and concerns about health condition | 0.157 | -0.004 | 0.079 | 0.04 | 0.023 | 0.291 |
| Doctors do their best to make patients feel better emotionally | 0.767 | -0.006 | 0.07 | 0.003 | 0.644 | 0.893 |

a. Unless otherwise noted, bootstrap results are based on 300 bootstrap samples

Table 3: CMIN (Source: Authors Survey Responses)

| Model | NPAR | CMIN | DF | P | CMIN/DF |
|--------------------|------|---------|----|-------|---------|
| Default model | 14 | 4.64 | 1 | 0.031 | 4.64 |
| Saturated model | 15 | 0 | 0 | | |
| Independence model | 5 | 773.933 | 10 | 0 | 77.393 |

Table 4: CMIN (Source: Authors Survey Responses)

| Model | NPAR | CMIN | DF | P | CMIN/DF |
|--------------------|------|---------|----|-------|---------|
| Default model | 9 | 0.286 | 1 | 0.593 | 0.286 |
| Saturated model | 10 | 0 | 0 | | |
| Independence model | 4 | 183.554 | 6 | 0 | 30.592 |

5. Discussion and Conclusion

Researchers and practitioners who could think about implementing the findings to enhance service quality and patient happiness in the hospital environment (Hsieh & Hsiang, 2004) in India can benefit from the introduction model of service quality and satisfaction mentioned in this study.

The model, in theory, highlights numerous service dimensions that are crucial for Indian hospital patients (and perhaps other developing countries). These five qualities are primarily subjective rather than objective in nature due to the intangibility of the service and the potential difficulties for patients in judging its technical competence, but they effectively accounted patient satisfaction with hospital services. These dimensions represent patient-centered service quality indicators (Herold, Sipilä, Tarkiainen, & Sundqvist, 2017) in the hospital environment and have very good measurement qualities; their usage in assessing hospital services should improve the treatment given to patients who have received subpar care.

In order to understand the second set of credibility criteria regarding the consistency in treatment provided by the hospitals, our analysis found that the likelihood of choosing the service provider is positively correlated with their degree of satisfaction with the treatment process they experienced in the past. All of the parameters associated to the consistency in treatment are discovered in relation to the likelihood of selecting a service provider in the next section through structural equation modelling.

In the context of healthcare culture, where individuals place a lot of emphasis on the patient treatment process, it is readily understood. Furthermore, by creating a market environment in which a variety of service providers are present and their numbers are expanding quickly, consumers can learn more about the providers during the first interaction with them, making the study's findings more valuable in the context of the healthcare industry. However, because the study was only able to cover a tiny portion of India, we were unable to collect data from all the measures. India offers a wide range of socioeconomic diversification and geographic diversity. The sample includes opinions from middle-aged respondents as well as slightly more patient data from private hospitals. When confirming the results, a sample from a more diversified geographic and demographic area will be more beneficial.

6. Implications of the Study

The study's findings are extremely important for service providers since they show how crucial customer loyalty is to winning over customers. In terms of healthcare, consumers rely more on the opinions of others, but their friends, relatives, and prior experiences also have a significant impact. In today's settings, this would be more logical, and one of the decision-making factors is the significance of secondary information obtained from patient views on the internet.

In this study, the reconsideration of service providers in light of credence services was investigated. Credence services are the hardest service offers for customers to evaluate, both before and after purchase, hence it is essential for service providers and academics in this field to have a better grasp of the key factors that influence this process. This study looked at particular kinds of information and gave a thorough review of the procedure.

For those working as practitioners in this field, these findings are immediately relevant. For a unified message and synergy, service providers must make sure that these communication channels are collaborating. Despite the fact that information is available from other sources, their sales force is a crucial part of this communications mix. Sales people need to be aware of the data that consumer reports are offering so that their discussion builds on and supports that content. In addition to being knowledgeable about the service, they must also be able to address the risk factors that the customer encounters, either through more emotive ways like developing a trustworthy reputation or more rational means like using features and proof.

7. Future Research & Limitation of the study

The study has some limitations but is inspired to provide a number of insights in the investigation. First of all, the study was conducted in a small geographic area with only three dimensions of Basic amenities, beginning care, and in-outpatient procedure with administration policy for hospitality services; therefore, future research should make an effort to include more dimensions such as the institution's equipment quality, the doctors' qualifications, and their expertise which could influence the client while selecting the service provider.

Second, the data were gathered from two cities in India's northern region. India is a big country with 35 states, including the union state, which has a wide variety. Thirdly, the study excluded any consideration of any speciality factors and simply examined the institution's ability to provide services to consumers. Therefore, it would be great to evaluate the model's suitability in different service contexts. Researchers should take into account and disseminate all other healthcare parameters in future studies.

References

- Agrawal, A., Green, E. P., & Lavergne, L. (2019). Gender effects in the credence goods market: An experimental study. *Economics Letters*, 174, 195-199. <https://doi.org/10.1016/j.econlet.2018.11.019>
- Al-Abri, R., & Al-Balushi, A. (2014). Patient satisfaction survey as a tool towards quality improvement. *Oman Med J*, 29(1), 3-7. <https://doi.org/10.5001/omj.2014.02>
- Al-Damen, R. (2017). Health Care Service Quality and Its Impact on Patient Satisfaction “Case of Al-Bashir Hospital”. *International Journal of Business and Management*, 12(9). <https://doi.org/10.5539/ijbm.v12n9p136>
- alford. (1996). <alford1996-The Role of Affect in Consumer Satisfaction.pdf>.
- Ali, D. A. (2016). Patient satisfaction in Dental Healthcare Centers. *Eur J Dent*, 10(3), 309-314. <https://doi.org/10.4103/1305-7456.184147>
- Asnawi, A. A., Awang, Z., Afthanorhan, A., Mohamad, M., & Karim, F. (2019). The influence of hospital image and service quality on patients’ satisfaction and loyalty. *Management Science Letters*, 911-920. <https://doi.org/10.5267/j.msl.2019.2.011>
- Batbaatar, E., Dorjdagva, J., Luvsannyam, A., Savino, M. M., & Amenta, P. (2017). Determinants of patient satisfaction: a systematic review. *Perspect Public Health*, 137(2), 89-101. <https://doi.org/10.1177/1757913916634136>
- Carlin, C. S., Christianson, J. B., Keenan, P., & Finch, M. (2012). Chronic illness and patient satisfaction. *Health Serv Res*, 47(6), 2250-2272. <https://doi.org/10.1111/j.1475-6773.2012.01412.x>
- Chocarro, R., Cortinas, M., & Villanueva, M. L. (2018). Different channels for different services: information sources for services with search, experience and credence attributes. *The Service Industries Journal*, 41(3-4), 261-284. <https://doi.org/10.1080/02642069.2018.1508457>
- Fatima, T., Malik, S. A., & Shabbir, A. (2018). Hospital healthcare service quality, patient satisfaction and loyalty. *International Journal of Quality & Reliability Management*, 35(6), 1195-1214. <https://doi.org/10.1108/ijqrm-02-2017-0031>
- Goel, S., & Srivastava, N. (2018). A study of patient satisfaction level in inpatient spine department of a tertiary care multi-speciality hospital. *Journal of Medical Research and Innovation*. <https://doi.org/10.15419/jmri.147>
- Hamilton, D. F., Lane, J. V., Gaston, P., Patton, J. T., Macdonald, D., Simpson, A. H., & Howie, C. R. (2013). What determines patient satisfaction with surgery? A prospective cohort study of 4709 patients following total joint replacement. *BMJ Open*, 3(4). <https://doi.org/10.1136/bmjopen-2012-002525>
- Kumar, R. S., Dash, S., & Malhotra, N. K. (2018). The impact of marketing activities on service brand equity. *European Journal of Marketing*, 52(3/4), 596-618. <https://doi.org/10.1108/ejm-05-2016-0262>