

A STUDY ON MEASURING PATIENTS' SATISFACTION USING SERVQUAL
MODEL IN MELAKA PRIVATE HOSPITAL

SU PEI SHIN

Faculty of Technology Management and Technopreneurship
UNIVERSITI TEKNIKAL MALAYSIA MELAKA

A STUDY ON MEASURING PATIENTS' SATISFACTION USING SERVQUAL
MODEL IN MELAKA PRIVATE HOSPITAL

SU PEI SHIN

This Thesis Is Submitted In Partial Fulfilment Of The Requirements For The Award
Of Bachelor Of Technology Management (Technology Innovation) With Honours

Faculty of Technology Management and Technopreneurship
Universiti Teknikal Malaysia Melaka (UTeM)

JUNE 2019

APPROVAL

I/We hereby declare that I/We have read and go through this dissertation/report/thesis and certify that, this dissertation/report/thesis is satisfactory in the sense of scope and quality as a partial fulfilment the requirements for the award of Bachelor of Technology Management (Technology Innovation) with Honours

SUPERVISOR’S SIGNATURE : _____

SUPERVISOR NAME : Dr. Nurulizwa Binti Abdul Rashid

DATE : _____

PANEL’S SIGNATURE : _____

PANEL NAME : Prof. Dr. Md Nor Hayati Tahir

DATE : _____

DECLARATION OF AUTHORSHIP

I declared that this thesis entitled
**“A STUDY ON MEASURING PATIENTS’ SATISFACTION USING
SERVQUAL MODEL IN MELAKA PRIVATE HOSPITAL”**

is my own work except as cited with sources in the reference. The thesis is not been accepted for any degree and is not submitted in the candidature of any other degree.

SIGNATURE : _____

NAME : SU PEI SHIN

DATE : _____

DEDICATION OF RESEARCH

I am sincerely expressing my gratitude to my family members because they gave moral support to me no matter in terms of spiritual or financial, my respected supervisor and panel who willing to lead and guide me throughout the journey of completing this research study and beloved course mates as they assisted me to accomplish my research study within the time frame.

ACKNOWLEDGEMENT

Firstly, I want to send my regards to my beloved supervisor, Dr. Nurulizwa Binti Abdul Rashid who willing to guide and assist me in completing my research study of the final year project. With the help given by Dr. Nurulizwa Binti Abdul Rashid, I managed to accomplish my research study successfully. Besides, I want to thank my lecturers and my fellow friends who give supports and advices to me so that the quality of my final year project can be enhanced. I am sincerely thankful for the guidance and support provided because it plays an important role for this project to succeed.

Besides, I am deeply appreciated the researchers that conducted those similar studies that related to my research study topic and willing to publish online. This has helped me a lot in understanding the related theories and knowledge on my research study topic. It acts as my reference throughout my journey in completing my final year project.

Lastly, I am very grateful to the selected respondents who take part in this research. They are eager to spend their valuable time and effort in answering the given questionnaire. Without the cooperation from the respondents, it will be hard for me to accomplish my thesis in the limited time frame. I hope that this research study will be useful and beneficial in the future which can contribute to the society.

ABSTRACT

There are many kinds of sectors or industries in a country. However, healthcare industry is important as it is the driver for the financial development and economic growth. Therefore, the service quality delivered by the healthcare industry particularly in the private hospital should be excellent in order the patients are happy with the service quality, therefore it can help in building customer loyalty and eventually provide profitability to the private hospital. The aim of the research paper is to describe the significant influences in the service quality that affect patients' satisfaction using SERVQUAL Model in the private hospital. The outcomes of this research paper would be able to represent whether the patients in the private hospital are more concerned to which kind of service quality. In this study, there are five independent variables which are tangibility, empathy, assurance, reliability and responsiveness of the service quality in measuring satisfaction of the patients in the private hospital. Next, secondary data such as literature review also is used in this paper. The proposed research framework is developed after understanding and interpreting the information from the literature review from different perspectives of researchers. Besides, primary data of this research is collected from 150 questionnaires among patients in a private hospital using probability sampling techniques which is the cluster sampling technique through drop and collect questionnaires distribution. The findings of this research should contribute to organization and government to identify the importance of private hospital of Malaysia for economic growth and improvement of the healthcare industry itself.

Keyword – *private hospital, service quality, SERVQUAL Model, patients' satisfaction*

ABSTRAK

Terdapat pelbagai jenis sector atau industry dalam sesebuah negara. Walaubagaimanapun, sektor kesihatan terutamanya hospital swasta di mana ia merupakan elemen yang amat penting dalam menaikkan ekonomi negara. Justeru, kualiti servis yang disampaikan daripada hospital swasta haruslah mencapai tahap yang terbaik supaya pesakit-pesakit dalam sektor kesihatan berpuas hati dengan kualiti servis yang diberi. Dengan itu, ia boleh membina kesetiaan pelanggan and seterusnya meraih keuntungan kepada hospital swasta. Objektif penyelidikan ini adalah untuk mengenalpasti faktor penting dalam kualiti servis yang boleh mempengaruhi kepuasan pesakit-pesakit dalam hospital swasta dengan menggunakan Model SERVQUAL. Pencarian penyelidikan ini boleh menunjukkan tentang jenis pengambilberatan kualiti servis terhadap pesakit-pesakit dalam hospital swasta. Dalam kajian ini, terdapat lima faktor yang dikaji iaitu ketaranya, empati, keyakinan, kebergantungan dan ketindakbalasan dari segi kualiti servis dalam mengukur tahap kepuasan pesakit-pesakit dalam hospital swasta. Selain itu, data sekunder digunakan sebagai sumber kesusasteraan dalam penyelidikan ini. Cadangan rangka kajian telah dibuat setelah kefahaman dan tafsiran daripada sumber kesusasteraan daripada para penyelidik. Manakala, data primer kajian ini diambil melalui pengumpulan sebanyak 150 soal selidik daripada hospital swasta dengan menggunakan kaedah pensampelam kluster. Hasil kajian ini adalah diharapkan untuk menyumbangkan kepada organisasi dan kerajaan untuk mengenalpasti kepentingan sektor kesihatan di Malaysia demi pembangunan ekonomi dan penambahbaikan sektor kesihatan terutamanya dalam hospital swasta.

***Kata kunci** – hospital swasta, kualiti servis, Model SERVQUAL, kepuasan pesakit-pesakit*

TABLE OF CONTENT

CHAPTER	TITLE	PAGES
	APPROVAL	i
	DECLARATION OF AUTHORSHIP	ii
	DEDICATION OF RESEARCH	iii
	ACKNOWLEDGEMENT	iv
	ABSTRACT	v
	ABSTRAK	vi
	TABLE OF CONTENT	vii
	LIST OF TABLES	x
	LIST OF FIGURES	xii
	LIST OF ABBREVIATIONS	xiii
	LIST OF APPENDICES	xiv
CHAPTER 1	INTRODUCTION	
1.0	Introduction	1
1.1	Research Background	1
	1.1.1 Malaysia Healthcare Industry	5
	1.1.2 Customer Satisfaction Index in Malaysia	6
1.2	Problem Statement	7
1.3	Research Questions	9
1.4	Research Objectives	9
1.5	Scope of Research Study	10
1.6	Significance of Research Study	10
1.7	Summary	10
CHAPTER 2	LITERATURE REVIEW	
2.0	Introduction	11
2.1	Healthcare Industry	12
	2.1.1 Definition of Healthcare Industry	12
	2.1.2 World Health Organization (WHO)	12
	2.1.3 Malaysia's Private Healthcare Services	13
	2.1.4 Statistics of Patients in Malaysia Private Hospitals	15
2.2	Service Quality	16

2.2.1	Definition of Service Quality	16
2.2.2	Importance of Service Quality	17
2.2.3	Service Quality Gap Model	18
2.3	SERVQUAL Model	22
2.3.1	Dimensions of SERVQUAL Model	22
2.3.2	Application of SERVQUAL Model in Researches	23
2.4	Patients' Satisfaction	24
2.5	Summary of Role of Service Quality Towards Patients' Satisfaction in Private Hospital	26
2.6	Conceptual Framework	28
2.7	Summary	28

CHAPTER 3 RESEARCH METHODOLOGY

3.0	Introduction	29
3.1	Theoretical Framework	29
3.1.1	Hypothesis Testing	30
3.2	Research Design	31
3.2.1	Research Approach	32
3.2.2	Questionnaire Development	32
3.2.3	Operationalization of Variables	34
3.2.3.1	Variables	35
3.2.4	Pilot Test	37
3.3	Data Collection	37
3.3.1	Sampling Technique	38
3.3.2	Sampling Size	39
3.3.3	Key Informants	40
3.4	Data Analysis	41
3.4.1	Descriptive Analysis	41
3.4.2	Reliability and Validity Analysis	42
3.4.3	Pearson Correlation	44
3.4.4	Multiple Linear Regression Analysis	45
3.5	Summary	46

CHAPTER 4 DATA ANALYSIS

4.0	Introduction	48
4.1	Descriptive Analysis	49
4.1.1	Background of the Respondents	49
4.1.1.1	Gender	49
4.1.1.2	Age	50
4.1.1.3	Ethnicity	51
4.1.1.4	Nationality	52
4.1.1.5	Employment Status	53
4.1.1.6	Rating of Service Quality	54

4.1.1.7	Frequency of Visiting the Private Hospital	55
4.1.2	Mean Score Analysis for Variables	56
4.1.2.1	Tangibility	56
4.1.2.2	Empathy	57
4.1.2.3	Assurance	58
4.1.2.4	Reliability	59
4.1.2.5	Responsiveness	60
4.1.2.6	Patients' Satisfaction	61
4.2	Reliability and Validity Analysis	62
4.3	Pearson Correlation	63
4.3.1	Tangibility	64
4.3.2	Empathy	65
4.3.3	Assurance	65
4.3.4	Reliability	66
4.3.5	Responsiveness	67
4.3.6	Overall Correlation Results between All Variables	68
4.4	Inferential Statistics	69
4.4.1	Multiple Linear Regression Analysis	69
4.5	Hypothesis Testing	72
4.6	Summary	74

CHAPTER 5 DISCUSSION, CONCLUSION AND RECOMMENDATION

5.0	Introduction	77
5.1	Discussion of Findings	77
5.1.1	Relationship between Tangibility with Patients' Satisfaction	80
5.1.2	Relationship between Empathy with Patients' Satisfaction	80
5.1.3	Relationship between Assurance with Patients' Satisfaction	81
5.1.4	Relationship between Reliability with Patients' Satisfaction	82
5.1.5	Relationship between Responsiveness with Patients' Satisfaction	83
5.2	Significant Implication of Research	83
5.2.1	Implication Towards Theoretical Aspect	84
5.2.2	Implication Towards Managerial Aspect	84
5.2.3	Implications Towards Policy Makers	86
5.3	Limitation	86
5.4	Recommendation for The Future Research	87
5.5	Conclusion	88

REFERENCES	89
APPENDICES	101

LIST OF TABLES

TABLE NO.	TITLE	PAGE
1.1	Sub-sectors and its areas	4
2.1	Ten Principal Causes of Hospitalisations in Private Hospitals in 2016 and 2017	15
2.2	Summary of Role of Service Quality Towards Customers Satisfaction in Private Hospital	27
3.1	Operationalization of Variables	34
3.2	Variables	35
3.3	Determining Sample Size of Mahkota Medical Centre population	40
3.4	Cronbach's Alpha Coefficient Range and Strength of Association	42
3.5	Reliability Analysis	43
3.6	Validity Analysis	43
3.7	Summary of Research Questions, Research Objectives, Hypothesis of Research and Data Analysis	46
4.1	Mean Score Analysis for Tangibility	56
4.2	Mean Score Analysis for Empathy	57
4.3	Mean Score Analysis for Assurance	58
4.4	Mean Score Analysis for Reliability	59
4.5	Mean Score Analysis for Responsiveness	60
4.6	Mean Score Analysis for Patients' Satisfaction	61

4.7	Cronbach's Alpha Coefficient Range and Strength of Association	62
4.8	Reliability and Validity of All Variables	63
4.9	Tangibility Correlation Results	64
4.10	Empathy Correlation Results	65
4.11	Assurance Correlation Results	65
4.12	Reliability Correlation Results	66
4.13	Responsiveness Correlation Results	67
4.14	Overall Correlation Results between All Variables	68
4.15	Model Summary of Multiple Linear Regression Analysis	69
4.16	ANOVA of Regression Analysis	70
4.17	Regression Analysis on Coefficients	70
4.18	Research Objectives, Research Questions, Hypothesis of Research and Results	75
5.1	Results of Hypothesis Testing	79

LIST OF FIGURES

FIGURE NO.	TITLE	PAGE
1.1	List of services sub-sectors for liberalisation	3
1.2	Current Healthcare Systems of Malaysia	5
2.1	Private Sector Expenditure by Providers of Health Services, 2016	14
2.2	Service Quality Gap Model	18
2.3	Conceptual Framework of the Research	28
3.1	Theoretical Framework of the Research	29
3.2	Likert Scale	33
3.3	Pearson Coefficient	44
3.4	Equation of Multiple Linear Regression Analysis	45
4.1	Respondents' Gender	49
4.2	Respondents' Age	50
4.3	Respondents' Ethnicity	51
4.4	Respondents' Nationality	52
4.5	Respondents' Employment Status	53
4.6	Rating of Service Quality of Respondents	54
4.7	Frequency of Visiting the Private Hospital by Respondents	55
4.8	Pearson Correlation Coefficient	64

CHAPTER 1

INTRODUCTION

1.0 Introduction

In this chapter, it discusses about the overview of this research paper that helps to understand the level of satisfaction among patients which mainly focus on the patients that visit the Melaka private hospital such as the Mahkota Medical Centre, Melaka. This research intends to study the patients' satisfaction who visit the private hospital in Melaka using the SERVQUAL MODEL. There are seven main sections in this chapter. There are as such, research background, problem statement, research questions, research objectives, scope of the study and lastly the significance of study.

1.1 Research Background

Malaysia has gained its independence since the 31st August 1957. From then, Malaysia has transformed its economy profitably where Malaysia is initially an agriculture and commodity-based country, to now Malaysia has become a host in the manufacturing and service sectors. The current population of Malaysia is 32,160,379 based on the latest United Nations estimates which equivalent to 0.42% of the total

world population. Now, with an average trade-to-GDP ratio of over 140% since 2010, Malaysia has become one of the world's most open market.

The third type of economic sectors is tertiary sector or the service sector. Primary sector is the raw materials and manufacturing is the secondary sector. The service sector consists of the production of services instead of producing end products. The Government of Malaysia has created a system for the New Economic Model from the Malaysian Investment Development Authority, MIDA (2018), to move Malaysia from a middle-income to a high-income economy in terms of advancement, innovation and high-value sources of economic development. Tonne of effort has been strengthened to target and pull industries in which Malaysia has solid establishments for new development areas. New fields of growth are include education and training facilities, social insurance travel, eco-tourism, green technology including sustainable energy and energy conservation, economic services, innovative undertakings, ICTs such as telecommunications and mobile services, waste management, research and development (R&D) and design activities and regional operations such as the Principal Hub (PH), Representations Office (RE), Regional Office (RO) and Treasury Management Centre (TMC). The service sector will continue to be the key driver of the country's economic growth in the Eleventh Malaysia Plan 2016 to 2020. On 22nd April 2009, the Government altered the service sector to gradually increase foreign investments and bring more specialists and innovation in technology to strengthen the sector's competitiveness. After perceiving growth capacity in the service sector, the Government has selected to alter 27 services subsectors in the fields of health and social services, transport services, business services, computer services and associated services as per Figure 1.1 below. Further in year 2012, the Government has liberalised additional of six broad service sectors such as telecommunication, healthcare, professional services, environmental services, distributive trade services and education services as per Table 1.1. This phenomenon has allowed up to 100% foreign equity engagement in phases.













Services sub-sectors for liberalisation	
 <p>Computer and Related Services</p> <ol style="list-style-type: none"> 1. Consultancy services related to the installation of computer hardware (CPC 841). 2. Software implementation services - systems and software consulting services; systems analysis services; systems design services; programming services and systems maintenance services (CPC 842). 3. Data processing services - input preparation services; data processing and tabulation services; time sharing services and other data processing services (CPC 843). 4. Data base services (CPC 844). 5. Maintenance and Repair Services of Computers (CPC 845). 6. Other services - data preparation services; training services; data recovery services; and development of creative content (CPC 849). 	 <p>Transport Services</p> <ol style="list-style-type: none"> 18. Class C Freight Transportation (Private Carrier License - to transport own goods) (CPC 7123).
 <p>Health and Social Services</p> <ol style="list-style-type: none"> 7. All veterinary services (CPC 9320). 8. Welfare services delivered through residential institutions to old person and the handicapped (CPC 93311). 9. Welfare services delivered through residential institutions to children (CPC 93312). 10. Child day-care services including day-care services for the handicapped (CPC 93321). 11. Vocational rehabilitation services for handicapped (CPC 93324). 	 <p>Sporting and other recreational services</p> <ol style="list-style-type: none"> 19. Sporting Services (CPC 9641). (Sports event promotion and organisation services) 
 <p>Tourism Services</p> <ol style="list-style-type: none"> 12. Theme Park (CPC 96194). 13. Convention and Exhibition Centre (seating capacity of above 5,000) (CPC 87909). 14. Travel Agencies and Tour Operators Services (For inbound travel only) (CPC 7471). 15. Hotel and Restaurant services (for 4 and 5 star hotels only) (CPC 64110 and CPC 64199). 16. Food Serving Services (for services provided in 4 and 5 star hotels only) (CPC 642). 17. Beverage Serving Services for consumption on the premises (for services provided in 4 and 5 star hotels only) (CPC 643). 	 <p>Business Services</p> <ol style="list-style-type: none"> 20. Regional Distribution Centre (CPC 87909). 21. International Procurement Centre (CPC 87909). 22. Technical Testing and Analysis Services - composition and purity testing and analysis services, testing and analysis services of physical properties, testing and analysis services of integrated mechanical and electrical systems, and technical inspection services (CPC 8676). 23. Management Consulting Services - general, financial (excluding business tax), marketing, human resources, production and public relations services (CPC 8650).
	 <p>Rental/Leasing Services without Operators</p> <ol style="list-style-type: none"> 24. Rental/Leasing services of ships that excludes cabotage and offshore trades (CPC 83103). 25. Rental of cargo vessels without crew (Bareboat Charter) for international shipping (CPC 83103).
	 <p>Supporting and Auxiliary Transport Services</p> <ol style="list-style-type: none"> 26. Maritime Agency services (CPC 7454). 27. Vessel salvage and refloating services (CPC 7454). 

Figure 1.1: List of services sub-sectors for liberalisation

Source: Malaysian Investment Development Authority, MIDA (2018). Liberalisation of the Services Sector (Online), Retrieved from <http://www.mida.gov.my/home/liberalisation-of-the-services-sector/posts/>

Table 1.1: Sub-sectors and its areas

Sub-sectors	Areas
Telecommunication	<ul style="list-style-type: none"> - Telecommunication services (network service providers and network facilities providers licences) - Telecommunication Services (Application Service Providers licences)
Healthcare	<ul style="list-style-type: none"> - Private hospital services - Medical specialist services - Dental specialist services
Professional Services	<ul style="list-style-type: none"> - Accounting and taxation - Architectural services - Engineering services - Legal services - Quantity surveying services
Environmental Services	<ul style="list-style-type: none"> - Incineration services
Distributive Trade Services	<ul style="list-style-type: none"> - Departmental and specialty stores
Education Services	<ul style="list-style-type: none"> - Higher education with university status in private sector - International schools - Secondary education services of technical and vocational side - Secondary education services of technical and vocational side for students with special needs - Skills training centres

Source: Malaysian Investment Development Authority, MIDA (2018). Liberalisation of the Services Sector (Online), Retrieved from <http://www.mida.gov.my/home/liberalisation-of-the-services-sector/posts/>

1.1.1 Malaysia Healthcare Industry

Malaysia Healthcare System comprises of global-tax and government facilities and an effective private sector as per Figure 1.2. Under the civil service structure, the public sector of healthcare is systematic and is centralised by the Malaysia Ministry of Health (MOH). MOH designs and manages most public health services, but also utilizes some authority over the private sector. A schematic overview of the healthcare system is shown below. Approximately 82% of hospital care and 35% of outpatient care is given by the government industry. Approximately 18% of hospital care and 62% of outpatient care is given by the private industry. The Ministry of Health offers a full variety of services, including health promotion, disease prevention, remedial and corrective care provided through clinics and hospitals. The private healthcare industry, however, provides health services through medical clinic and private hospitals generally in urban regions. The private companies or organizations run the diagnostic workshops and some ambulance services (Jaafar S. et al., 2012).

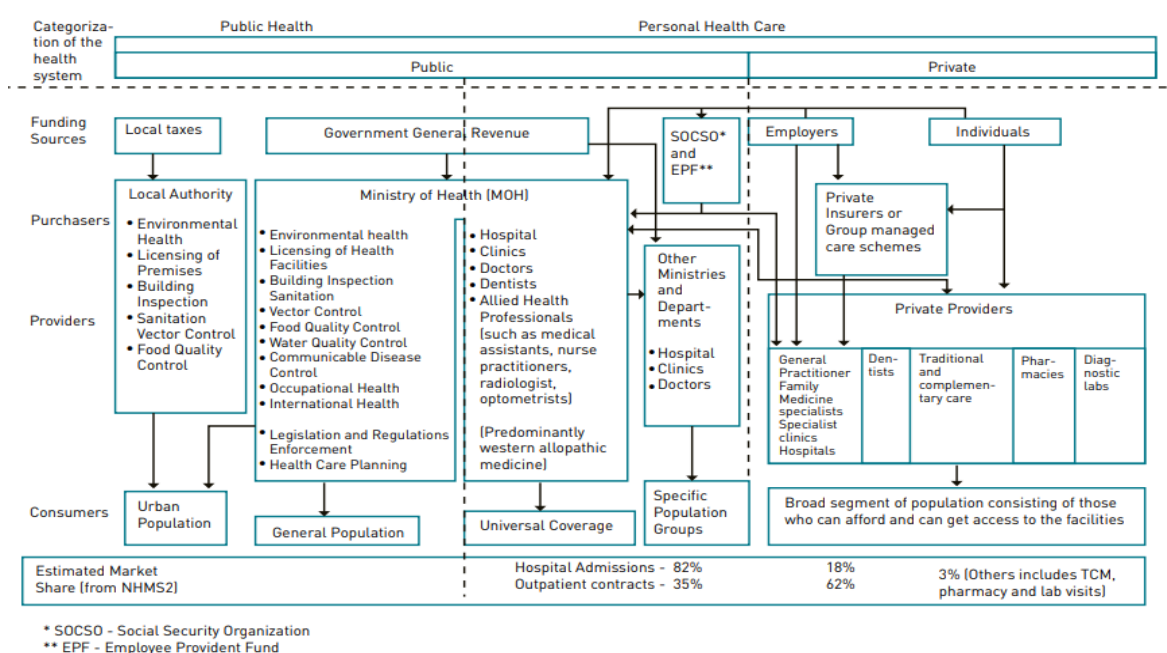


Figure 1.2: Current Healthcare Systems of Malaysia

Source: Jaafar S, Noh KM, Muttalib KA, Othman NH, Healy J, authors: O, Maskon K, Abdullah AR, Zainuddin J, Bakar AA, et al. Malaysia Health System Review.

Health Systems in Transition. 2012;3(1):1–102.

1.1.2 Customer Satisfaction Index in Malaysia

Talking about the service sectors in Malaysia, it is essential to keep them who is the clients, to fulfil with the service quality constantly. This is due to when the clients are happy with the service quality that is being provided, they will loyal to the service provider. This will increase the income to the service provider whenever the customers pay for their service. Customer satisfaction is therefore a very significant factor influencing service sector's revenue. In this competitive environment which full of technologies advancement, delivering high quality in term of service is a factor for a stable competitive advantage. Customer satisfaction has a beneficial impact on the profitability of an organization. A satisfied client is the basis of any successful company in the globe because customer satisfaction will lead to repeated buying, brand loyalty and favourable word of consumers' mouth.

According to the Malaysia Productivity Corporation, MPC (2018), Customer Satisfaction Index (CSI) measures the satisfaction level of customers towards product or services that being provided. It is needed to create a complete perception to the customers pre and post purchasing behaviour. CSI raises the standard of excellence company service and focus on the improvement of quality. Besides, it can enhance the brand reputation, build a long-term relationship between customers and organizations, and acts as an indicator of the company's health. In short, customer satisfaction is directly connected to profitability of organizations. If the client is satisfied with the service or the product, he or she tends to be faithful and have a powerful faith in the brand that is the business itself. When the customer is loyal, he or she not only will buy or purchase more, but the customer will refer to other customers as well.

The Malaysia Productivity Corporation (MPC) is a body that concern about the productivity of the Malaysia in the context of development and management of business sectors. Based on MPC's background, the National Productivity Corporation was founded in 1962. It was a joint project with an executing agency, the International Labour Organization, between the United Nations Special Fund and the Federal Government. Until now, the National Productivity Corporation has been known as the Malaysia Productivity Corporation since 21st February 2008. There is an act implemented to maintain the company's extended position which is the Malaysia Productivity Corporation Act (Incorporated) 1966.

The provisions under Section 7 of the Act with the functions of the Corporation are as below:

- To get advancement and dissemination of efficiency related data and issues;
- To set up a data and reference focus about productivity file for the country and for the broad frameworks and contextual investigation;
- To create local expertise in the efficiency, management, quality and entrepreneurship fields;
- To build the human asset improvement of administrative and supervision levels in the nation;
- To inform the usage of activities in relation of profitability and quality;
- To assess and approve managerial training programmes, business enterprise projects and quality management programmes directed by the private sector for the public;
- To perform consultancy activities related to profitability, quality, management and entrepreneurship;
- To do business undertakings for the purposes of the discharges of its capacities under the Act;
- To report annually to the Minister about the development and issues on enhancing efficiency in business and industry and to provide recommendations on the issues ; and
- To do such things and activities as may be consequential upon the release of its function under the Act.

1.2 Problem Statement

According to Dr. Milton Lum (2018), the demand in the healthcare industry in Malaysia is increasing especially in the private hospital and continues unreduced with chances for improvement and innovation in the aspects of diagnoses and medical treatment. However, the economic uncertainties and budgetary pressure continue to put financial constraint on the provision of healthcare services. Healthcare expenditure has rose due to larger population, uncommunicable and infectious diseases, new technology and the demand from the patients. When the healthcare expenditure is

getting higher, it is a must to make sure the patients are satisfied with the service provided so that the increased expenditure is not wasted.

In the views of Datta, K. S., & Vardhan, J. (2017), many researchers are studying SERVQUAL Model, a service quality tool created by Parasuraman, Zeithaml, and Berry (1988) in certain sectors or regions to evaluate the customers satisfaction. Financial services (Lin, 1999), travel and tourism (Kaynama, 2000), retail (Mehta, 2000), telecommunications (Abu-El Samen, Akroush, & Abu-Lail, 2013) and ecotourism (Yusof, Rahman, Jamil, & Iranmanesh, 2014) are included. Although there are many academic researches about SERVQUAL Model, but there are not much academic researches that measure patients' satisfaction in the healthcare industry especially in the private hospital using SERVQUAL Model. SERVQUAL Model is a model that is utilized to quantify the service quality. For example, Cham et al. (2016) studied the social expectations of medical tourists in relation to the brand image of hospitals and the interceding effects of perceived value and trust. In the research, it studied about the behavioural intention using SERVQUAL Model. Other than that, there is a research studied by Kim CE, Shin JS, Lee J et al (2017) about the patient satisfaction and loyalty with an emphasis on relational based medical services encounters and treatment effectiveness. The researchers used another dimensions instead of SERVQUAL Model to test patient satisfaction, they used factors such as social relationship-based medical services from the doctor, nursing staff and administrative management; impact of service quality on therapeutic treatment and, the assessment of service quality satisfaction and the intention of revisiting by the patients. Looking at the mentioned problems and challenges in the Malaysia private hospitals, there is a need to study on the patients who engaged significantly with the private hospitals, especially in term on the patients' satisfaction as customers are the main factor of the growth of the industry in Malaysia.

1.3 Research Questions

This paper is attempting to emphasize the elements which affect the satisfaction of patients in Melaka private hospital using the SERVQUAL Model. The following questions had been addressed in this research:

1. What is the implementation level of tangibility, empathy, assurance, reliability, responsiveness and patients' satisfaction in Melaka private hospital?
2. What are the relationships between the tangibility, empathy, assurance, reliability and responsiveness towards patients' satisfaction in Melaka private hospital?
3. What are the most significant factors that influence the level of patients' satisfaction in Melaka private hospital?

1.4 Research Objectives

1. To describe the implementation level of tangibility, empathy, assurance, reliability, responsiveness and patients' satisfaction in Melaka private hospital.
2. To measure the relationship between tangibility, empathy, assurance, reliability and responsiveness towards patients' satisfaction in Melaka private hospital.
3. To examine the most significant factors that influence the level of patients' satisfaction in Melaka private hospital.

1.5 Scope of Research Study

This study emphasis the variables influencing patients' satisfaction with the SERVQUAL Model in the private hospital in Melaka. In this research, it seeks to describe the implementation level of tangibility, empathy, assurance, reliability, responsiveness and patients' satisfaction, to measure the relationship between tangibility, empathy, assurance, reliability and responsiveness towards patients' satisfaction and lastly to examine the most significant factors that influence the level of patients' satisfaction in Melaka private hospital.

1.6 Significance of Research Study

To improve patients' satisfaction, the results of this research will be able to highlight the important variables in the application of tangibility, empathy, assurance, reliability and responsiveness on the quality of service. It also promotes the New Economic Model structure to move Malaysia from a middle-income to a high-income economy in terms of innovation, creativity and high value development sources. Besides, it gives a positive reputation on the medical service quality in Malaysia's healthcare industry particularly in the private hospitals towards patients. The results of this research will help in filling the gap between SERVQUAL Model in terms of theoretical aspect, particularly in private hospitals.

1.7 Summary

This section describes about the research study's summary. The background to the study focused on implementation level of tangibility, empathy, assurance, reliability, responsiveness and patients' satisfaction in Melaka private hospital, followed by a description of the research problems to be investigated, the objective and the questions of the research, scope of the study and lastly the significant of study. This information will continue to be developed and explained in Chapter 2.