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Appraising Service Quality of Medical Clinics on Customer Value in Manmunai North Batticaloa

Thuvaraka Mahendran
Faculty of commerce and management
Eastern university, Sri Lanka
Batticaloa, Sri Lanka

Mrs. V. R. Ragel
BBA Hons (EUSL), M.Sc. in Management, SEDA
Senior Lecturer in Management
Department of Management
Faculty of Commerce and Management

Abstract- *The healthcare system contributes to continued sustainable economic growth in Sri Lanka, as the country's economic growth is directly proportional to the healthcare system. Medical Clinics play a remarkable role in the country's development as they provide medical equipment and deliver medical facilities to patients. To investigate the impact of service quality on customer value in Medical Clinics through the SERVQUAL Model. The sample consists of customers (patients) and samples selected through a convenient sampling method. The researcher collected 240 self-administered questionnaires for the survey, and a five-point Likert scale was assigned to measure the variables. The Statistical Package for Social Sciences (SPSS 22.0) was used to present and analyze the data. This exploration concludes that service quality and each of the situations of the independent variable dimensions are at a high position. Further, the finding shows that there is a high level of customer value among those who are using Medical Clinics in Manmunai North Batticaloa. There is a strong positive correlation between service quality and customer value. The study also concludes that there is an impact of service quality on customer value. The empirical evidence from this study increases the understanding of the relationship between service quality and customer value, which helps the service sector, especially medical clinics, improve their customer value through the SERVQUAL model.*

Index Terms— SERVQUAL Model, Service quality, Customer value, Medical Clinics, Manmunai North Batticaloa.

I. INTRODUCTION

The healthcare system is the most prominent sector in Sri Lanka's economy. The country's economic growth is directly proportional to the healthcare system. Medical Clinics play a remarkable role in the country's development as they provide medical equipment and deliver medical facilities. Service quality is expected to be affected because of the availability of the cost factor. Customer value is the combination of physical and service attributes used to create a competitive advantage for an organization.

In this highly competitive world, satisfying consumers is more difficult, which is why services provide more opportunities to exceed customer expectations. A lack of studies has identified whether service quality dimensions and customer value are relevant in Medical Clinics.

Medical Clinics are the most prominent determinant of the Sri Lankan economy. Service quality has a significant impact on customer value. The most important thing is how customers interpret value, not how suppliers believe value is considered to be [5], [26].

The concept of service quality as a determinant factor for customer value is rarely researched in the Sri Lankan context. It is very arduous to find empirical studies and to do research work on this topic. This indicates that there is a clear empirical gap on this topic that needs to be evaluated. But its population is limited to the Jaffna district. In order to fulfill the population revealed by the previous study, the research must investigate service quality determinant factors for customer value with special reference to Medical Clinics in Manmunai North Batticaloa. Previous research found significant positive relationships between service quality determinant factors and customer value [8], [26]. The main problem can be identified as,

"How does service quality impact on customer value?"

II. REVIEW OF LITERATURE

A. Service quality

Service quality is the difference between customer expectations and perceptions of a service's performance [22]. Customers expect great service, reasonable prices, faster delivery, and excellent service from a service organization looking to grow and gain a competitive advantage. Service quality has received more attention in recent years as a result of its unique contribution to corporate competitiveness and the development of satisfied consumers [20]. Measuring the quality of healthcare services supplied to patients is critical and can

provide opportunities to improve the services delivered to these patients [3]. Service quality is defined as the expected benefits and control over the level of excellence required to meet client expectations [31]. The level of service considered perfect is when the services obtained are viewed as exceeding client expectations [27]; if the service received is below expectations, the service quality is seen as bad.

B. SERVQUAL Model

A study, conducted by Parasuraman, Zeithaml, and Berry (1985), identified 97 attributes that affect service quality. These attributes were classified into ten dimensions and then subjected to two stages of purification. Later, researchers simplified these qualities to five, namely: responsiveness, assurance, tangible, empathy, and reliability [13], [21]. They are frequently employed in a variety of healthcare institutions [1], [15], [19], [27], [29].

Which are:

Tangible: Real things that are not imaginary and able to be shown, such as physical facilities, equipment, and the appearance of personnel.

Reliability: The ability to consistently, accurately, and reliably provide the intended   service.

Responsiveness-The willingness to assist and give fast service and help customers.

Assurance-The   employee's   knowledge,   courtesy, capabilities, trust, and confidence.

Empathy-The provision of caring, individualized attention to customers.

The SERVQUAL concept was created with service and retail companies in mind. Its objective is to understand how customers rate the services offered to them. The original five dimensions are subject to 22 statements derived from Parasuraman, Zeithaml, & Berry (1985). The SERVQUAL model is very important for grouping customers of an organization into different quality ranks. It was created to assess service quality by combining the gap idea with service quality factors. This method has been used in several studies to examine both customer service and provider performance perceptions [4], [17], [16].

C. Customer value

Creating superior customer value is a major goal for market-driven firms [27], [30]. Customer requirements and desires are used to define value. It is determined by perceived or expected performance in meeting customers' functional and psychological needs [25]. The implementation of laddering techniques to identify customer values has been made easier [12]. In order to predict customer behavior, the client's value is critical [4].

A client is an emotional tie established between a consumer and a provider. Customers (patients) profit from the manufacturer's appearance, service, and reputation. The potential benefits are a mix of physical features, service characteristics, and product approaches [10], [18].

D. Relationship between service quality and customer value

One of the most essential factors in establishing customer value is the perception of service quality [7], [14]. Customers' value is a measure of a service provider's efficiency and effectiveness in relation to their expenses and the manner in which services are obtained. There is a link between comprehending the value of a customer and the quality of the service [28]. According to Annamalah & Tan (2016), customer value is determined by separating the benefit of a service from the cost of obtaining the service. It is important to note, however, that high quality service aims at a positive client's perception of value. As a result, it's impossible to believe that every customer will receive the same customer value with the same level of service quality.

III. CONCEPTUAL MODEL

Based on the literature review, the following conceptual framework was constructed for the purpose of the study. The model's independent variable is service quality, and its dependent variable is customer value.
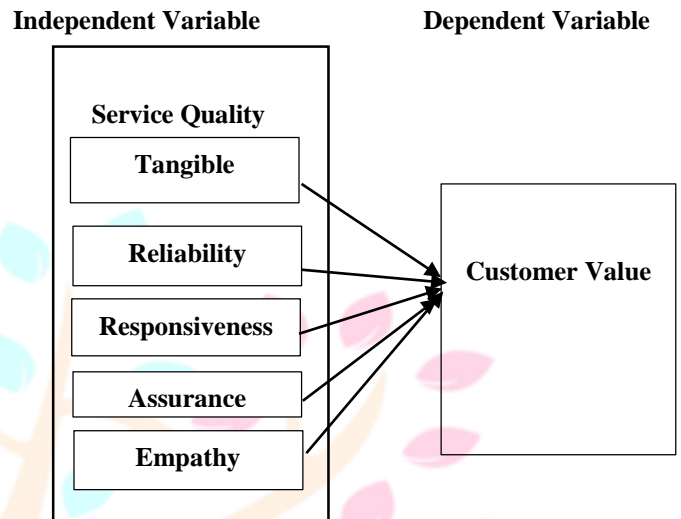

Fig. 1. Conceptual Framework
(Source: Dubey & Sahu, 2019; Sivanenthira & Kumaradeepan, 2015; Wang, Yang, & Lo, 2004)

A. Hypotheses of the Research

The topic of this study was "The impact of service quality on customer value." The following hypotheses are defined in order to investigate the impact of service quality components on customer value.

1) The Main Hypothesis

H1: There is a positive and significant effect of service quality on customer value.

2) Secondary Hypotheses

H2: Perceived service quality's tangible dimension has a positive and significant effect on customer value.

H3: Perceived service quality's reliability dimension has a positive and significant effect on customer value.

H4: Perceived service quality's responsiveness dimension has a positive and significant effect on customer value.

H5: Perceived service quality's assurance dimension has a positive and significant effect on customer value.

H6: Perceived service quality's empathy dimension has a positive and significant effect on customer value.

IV. RESEARCH METHODOLOGY

This research also contained a quantitative component. The quantitative study's goal is to assess the impact of service quality on customer value in medical clinics. The quantitative aspect of this study relies on the use of formalized survey questions; quantitative approaches emphasize objective measurement and statistical, mathematical, and numerical analysis of data gathered by self-administered questionnaires.

A. Sample and Data Collection

The target population of the study consisted of Medical Clinic patients who had been using Medical Clinics for more than three months in the Manmunai north divisional secretariat in Batticaloa. On the basis of the convenience sampling method,

240 customers (patients) were selected who had been using the Medical Clinic for more than three months in the Manmunai North divisional secretariat in Batticaloa.

Primary data was collected using closed-ended, Self-Administered questionnaires using a Likert scale. Participants were informed that their responses would be kept private.

B. Data Analysis

The collected data from the questionnaires were examined and evaluated by using univariate, bivariate and multivariate analyses. To make the analysis work for this study easier, the Statistical Package for Social Sciences (SPSS 22.0 Version) was used.

V. RESULTS AND DISCUSSION

A. Reliability analysis

Reliability is the degree to which measures are free from error and therefore yield consistent results [23]. Cronbach's Alpha analysis was used to assess the instrument's reliability. It measures the internal consistency of the instrument based on the average intercorrelation. The cutoff point for reliability is 0.7.

Below, Table 1 demonstrates the reliability of independent variables and dependent variables. According to this study, the overall variable reliability analysis of Cronbach's Alpha Coefficient for service quality is 0.925.

The Tangible is 0.740, Reliability is 0.731, Responsiveness is 0.777, Assurance is 0.791, Empathy is 0.703, and the dependent variable, Customer Value, shows a reliability of 0.813.

When the Cronbach's Alpha Coefficient value is above 0.70, it is considered an accepted and reliable instrument. In this study, Cronbach's Alpha Coefficient values for overall variables were above 0.70, which indicates that all items were considered reliable, which suggests that the internal reliability of each instrument was satisfactory. Therefore, the variables used were concluded to be reliable.

Table 1 Reliability Analysis for overall variables

Variables	Cronbach's Alpha	Comment
Service Quality	**0.925**	**Accepted**
Tangible	0.740	Accepted
Reliability	0.731	Accepted
Responsiveness	0.777	Accepted
Assurance	0.791	Accepted
Empathy	0.703	Accepted
Customer Value	**0.813**	**Accepted**

(Source: Survey Data)

B. Univariate Analysis

The first objective of this study was to investigate the levels of service quality (tangible, reliability, responsiveness, assurance and empathy) and customer value in Medical Clinics in Batticaloa-Manmunai North. In this study, univariate analysis was used to determine the level.

The variable of service quality includes five dimensions, which are tangible, reliability, responsiveness, assurance, and empathy. The mean values are 4.601, 4.726, 4.773, 4.661, and 4.697 with standard deviations of 0.468, 0.376, 0.402, 0.450, and 0.373. The overall service quality mean value is 4.692, with a standard deviation of 0.353. The overall mean value of customer value is 4.667 and it deviated from 0.501. It demonstrates that the selected customers' (patients') customer value is higher. These details are captured in Table 2.

Table 2 Descriptive Statistics for Study variable

Dimensions	Mean	Standard Deviation	Decision Attribute
Tangible (TA)	4.601	0.468	**High Level**
Reliability (RL)	4.726	0.376	**High Level**
Responsiveness (RS)	4.773	0.402	**High Level**
Assurance (AS)	4.661	0.450	**High Level**
Empathy (EM)	4.697	0.373	**High Level**
Service quality (SQ)	**4.692**	**0.353**	**High Level**
Customer value (CV)	**4.667**	**0.501**	**High Level**

(Source: Survey Data)

C. Correlation Analysis

The second objective of this study was to investigate whether there is a relationship between dimensions of service quality and customer value in Medical Clinics in Batticaloa-Manmunai North. In this study, bivariate analysis was used to investigate the relationship between an independent variable and a dependent variable. Here, correlation and regression analysis are used to find the relationship between independent and dependent variables. Pearson Correlation coefficient indicates the direction, strength, and significance of the bivariate relationships among all the variables that were measured on an interval scale [9].

Table 3 Coefficient Correlation between SQ and CV

Variable		CV
SQ	Pearson Correlation	.876**
	Sig. (2-tailed)	.000
**. Correlation is significant at the 0.01 level (2-tailed).		

(Source: Survey Data)

Table 3 shows the results of the Pearson correlation between service quality and customer value. The correlation coefficient

(r) value is 0.876 between service quality and customer value at the 0.01 significance level (2-tailed) is 0.000. Moreover, the value falls under the coefficient range of 0.5 to 1.0. Therefore, there is enough evidence to reject the null hypothesis and the following hypothesis is accepted.

H1: *There is a positive and significant effect of service quality on customer value.*

Therefore, it can be concluded that there is a strong, positive and significant relationship between service quality and customer value.

Table 4 Coefficient Correlation between TA and CV

Variable		CV
TA	Pearson Correlation	.741**
	Sig. (2-tailed)	.000
**. Correlation is significant at the 0.01 level (2-tailed).		

(Source: Survey Data)

Table 4 shows that the correlation coefficient (r) value is 0.741 between tangible and customer value at the 0.01 significance level (2-tailed) and is 0.000. Moreover, the value falls under the coefficient range of 0.5 to 1.0. Therefore, there is enough evidence to reject the null hypothesis and the following hypothesis is accepted.

H2: *Perceived service quality's tangible dimension has a positive and significant effect on customer value.*

Therefore, it can be concluded that there is a strong, positive and significant relationship between tangible and customer value.

Table 5 Coefficient Correlation between RL and CV

Variable		CV
RL	Pearson Correlation	.737**
	Sig. (2-tailed)	.000
**. Correlation is significant at the 0.01 level (2-tailed).		

(Source: Survey Data)

Table 5 shows that the correlation coefficient (r) value is 0.737 between reliability and customer value at the 0.01 significance level (2-tailed) is 0.000. Moreover, the value falls under the coefficient range of 0.5 to 1.0. Therefore, there is enough evidence to reject the null hypothesis and the following hypothesis is accepted.

H3: *Perceived service quality's reliability dimension has a positive and significant effect on customer value.*

Therefore, it can be concluded that there is a strong, positive and significant relationship between reliability and customer value.

Table 6 Coefficient Correlation between RS and CV

Variable		CV
RS	Pearson Correlation	.687**
	Sig. (2-tailed)	.000
**. Correlation is significant at the 0.01 level (2-tailed).		

(Source: Survey Data)

Table 6 shows that the correlation coefficient (r) value is 0.687 between responsiveness and customer value at the 0.01 significance level (2-tailed) and is 0.000. Moreover, the value falls under the coefficient range of 0.5 to 1.0. Therefore, there is enough evidence to reject the null hypothesis and the following hypothesis is accepted.

H4: *Perceived service quality's responsiveness dimension has a positive and significant effect on customer value.*

Therefore, it can be concluded that there is a strong, positive and significant relationship between responsiveness and customer value.

Table 7 Coefficient Correlation between AS and CV

Variable		CV
AS	Pearson Correlation	.786**
	Sig. (2-tailed)	.000
**. Correlation is significant at the 0.01 level (2-tailed).		

(Source: Survey Data)

Table 7 shows that the correlation coefficient (r) value is 0.786 between assurance and customer value at the 0.01 significance level (2-tailed) and is 0.000. Moreover, the value falls under the coefficient range of 0.5 to 1.0. Therefore, there is enough evidence to reject the null hypothesis and the following hypothesis is accepted.

H5: *Perceived service quality's assurance dimension has a positive and significant effect on customer value.*

Therefore, it can be concluded that there is a strong, positive and significant relationship between assurance and customer value.

Table 8 Coefficient Correlation between EM and CV

Variable		CV
EM	Pearson Correlation	.784**
	Sig. (2-tailed)	.000
**. Correlation is significant at the 0.01 level (2-tailed).		

(Source: Survey Data)

Table 8 shows that the correlation coefficient (r) value is 0.784 between empathy and customer value at the 0.01 significance level (2-tailed) and is 0.000. Moreover, the value falls under the coefficient range of 0.5 to 1.0. Therefore, there is enough evidence to reject the null hypothesis and the following hypothesis is accepted.

Model		Unstandardized Coefficients		Standardized Coefficients	Sig.
		B	Std. Error	Beta	
1	(Constant)	-1.249	.218		.000
	TA	.123	.054	.115	.025
	RL	.308	.070	.231	.000
	RS	.144	.061	.116	.019
	AS	.358	.058	.321	.000
	EM	.328	.070	.244	.000

H6: *Perceived service quality's empathy dimension has a positive and significant effect on customer value.*

Therefore, it can be concluded that there is a strong, positive and significant relationship between empathy and customer value.

D. Regression

The third objective of this study was to assess the impact of service quality on customer value in Medical Clinics in Manmunai North Batticaloa.

1) Simple regression analysis

Table 9 Model Summary of service quality (SQ) and customer value (CV)

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.876[a]	.768	.767	.242
a. Predictors: (Constant), SQ				

(Source: Survey Data)

Table 9 indicates that the R Square statistic value is 0.768, which means 76.8% of the variation in the dependent variable of customer value (CV) can be explained by the independent variable of service quality (SQ).

Table 10 ANOVA for service quality (SQ) and customer value (CV)

ANOVA[a]						
Model		Sum of Squares	df	Mean Square	F	Sig.
1	Regression	46.022	1	46.022	785.947	.000[b]
	Residual	13.936	238	.059		
	Total	59.958	239			
a. Dependent Variable: CV						
b. Predictors: (Constant), SQ						

(Source: Survey Data)

According to Table 10, the proposed model was adequate as the F statistic (F = 785.947, Df = 1,238) was significant at the 5% level since the p-value was less than 0.05 (p < 0.05).

Table 11 Coefficients of service quality and customer value

Model		Unstandardized Coefficients		Standardized Coefficients	Sig.
		B	Std. Error	Beta	
1	(Constant)	-1.167	.209		.000
	SQ	1.244	.044	.876	.000

(Source: Survey Data)

Table 11 shows the coefficient of simple linear regression between service quality (SQ) and customer value (CV). It indicates that the B coefficient for the service quality is 1.244. This means that, on average, if you go up 1 point on the service quality (SQ) scale, customer value (CV) will improve by 1.244 units. Furthermore, the same table indicates the p-value is 0.000, which is less than 0.05, which indicates service quality and customer value are statistically significant at 5% level of significance.

Thus, step one concludes that service quality has a positive and significant influence on customer value.

Based on Table 11, the regression equation can be written as follows:

$$Y = \beta_0 + \beta_1 x_1$$

x1=Service Quality (SQ)
CV= -1.167+1.244 (SQ)

2) Multiple linear regression

Table 12 Model Summary of Multiple Regression Analysis

Model Summary				
Model	R	R Square	Adjusted R Square	Std. Error of the Estimate
1	.882[a]	.779	.774	.238
a. Predictors: (Constant), TA, RL, RS, AS, EM				

(Source: Survey Data)

Table 12 indicates that the R Square statistic is 0.779, which means that 77.9% of the variation in customer value (CV) can be explained by tangible (TA), reliability (RL), responsiveness (RS), assurance (AS) and empathy (EM).

Table 13 ANOVA for Multiple Regression Analysis
(Source: Survey Data)

The proposed model was adequate as the F statistic (F = 164.706, df 5,234) was significant at the 5% level since the p-value was less than 0.05 (p < 0.05).

Table 14 Coefficient of Tangible (TA), Reliability (RL), Responsiveness (RS), Assurance (AS) and Empathy (EM)
(Source: Survey Data)

ANOVAª					
Model	Sum of Squares	df	Mean Square	F	Sig.
1 Regression	46.691	5	9.338	164.706	.000ᵇ
Residual	13.267	234	.057		
Total	59.958	239			
a. Dependent Variable: CV					
b. Predictors: (Constant), TA, RL, RS, AS, EM					

Based on Table 14, which describes the coefficients of multiple regression analysis of tangible (TA), reliability (RL), responsiveness (RS), assurance (AS), and empathy (EM) on customer value (CV), It indicates that the B coefficient for tangible is 0.123, which means when tangible (TA) is increased by one unit, customer value (CV) will increase by 0.123 units. It also indicates that the B coefficient for reliability (RL) is 0.308, which means when reliability (RL) is increased by one unit, customer value (CV) will increase by 0.308 units. The responsiveness (RS) indicates that the B coefficient is 0.144, which means when responsiveness (RS) is increased by one unit, customer value (CV) will increase by 0.144 units. Then, the assurance (AS) indicates that the B coefficient is 0.358, which means when assurance (AS) is increased by one unit, customer value (CV) will increase by 0.358 units. Finally, the B coefficient for empathy (EM) is 0.328, which means when empathy (EM) is increased by one unit, customer value (CV) will increase by 0.328 units.

Furthermore, the same table indicates the p-value is 0.000, which is less than 0.05. At the 5% level of significance, it indicates that tangible (TA) ($p < 0.05$, $\beta = 0.123$), reliability (RL) ($p < 0.05$, $\beta = 0.308$), responsiveness (RS) ($p < 0.05$, $\beta = 0.144$), assurance (AS) ($p < 0.05$, $\beta = 0.358$), and empathy (EM) ($p < 0.05$, $\beta = 0.328$) are statistically significant.
Hence, the regression model of the relationship between service quality and customer value (CV) can be expressed as follows:

$$Y = \beta_0 + \beta_1 x_1 + \beta_2 x_2 + \beta_3 x_3 + \beta_4 x_4 + \beta_5 x_5$$

$Y = -1.249 + 0.123\, x_1 + 0.308 x_2 + 0.144\, x_3 + 0.358\, x_4 + 0.328 x_5$
Where,
Y= Customer value (CV)
x1= Tangible (TA)
x2= Reliability (RL)
x3= Responsiveness (RS)
x4= Assurance (AS)
x5=Empathy (EM)

E. Testing Hypothesis

H1: There is a positive and significant effect of service quality on customer value.
Table 11 indicates the p-value is 0.000, which is less than 0.05. So, the researcher has enough evidence to conclude that there is a positive and significant effect of service quality on customer value, which means the null hypothesis has been rejected automatically. And previous empirical evidence has mentioned the same results [8]. Finally, the study's first hypothesis was accepted.
According to Table 14, coefficients of Multiple Regression Analysis results following the hypothesis were analyzed.

H2: Perceived service quality's tangible dimension has a positive and significant effect on customer value.

Table 14 indicates the p-value is 0.025, which is less than 0.05. So, the researcher has enough evidence to conclude that perceived service quality's tangible dimension has a positive and significant effect on customer value, where the null hypothesis has been rejected automatically. And previous empirical evidence has mentioned the same results [6], [8], [11], [26], [30]. Finally, the study's second hypothesis was accepted.

H3: Perceived service quality's reliability dimension has a positive and significant effect on customer value.

Table 14 indicates the p-value is 0.000, which is less than 0.05. So, the researcher has enough evidence to conclude that perceived service quality's reliability dimension has a positive and significant effect on customer value, where the null hypothesis has been rejected automatically. And previous empirical evidence has mentioned the same results [6], [8], [11], [26], [30]. Finally, the study's third hypothesis was accepted.

H4: Perceived service quality's responsiveness dimension has a positive and significant effect on customer value.

Table 14 indicates the p-value is 0.019, which is less than 0.05. So, the researcher has enough evidence to conclude that perceived service quality's responsiveness dimension has a positive and significant effect on customer value, where the null hypothesis has been rejected automatically. And previous empirical evidence has mentioned the same results [6], [8], [11], [26], [30]. Finally, the study's fourth hypothesis was accepted.

H5: Perceived service quality's assurance dimension has a positive and significant effect on customer value.

Table 14 indicates the p-value is 0.000, which is less than 0.05. So, the researcher has enough evidence to conclude that perceived service quality's assurance dimension has a positive and significant effect on customer value, where the null hypothesis has been rejected automatically. And previous empirical evidence has mentioned the same results [6], [8], [11], [26], [30]. Finally, the study's fifth hypothesis was accepted.

H6: Perceived service quality's empathy dimension has a positive and significant effect on customer value.

Table 14 indicates the p-value is 0.000, which is less than 0.05. So, the researcher has enough evidence to conclude that perceived service quality's empathy dimension has a positive and significant effect on customer value, where the null hypothesis has been rejected automatically. And previous empirical evidence has mentioned the same results [6], [8], [11], [26], [30]. Finally, the study's sixth hypothesis was accepted.

VI. CONCLUSION

The conclusion has been derived from the findings to meet the research objectives. Descriptive statistics, correlation, and regression were formulated in order to come up with findings related to the above research problem. The study was conducted with 240 customers (patients) throughout the six Medical Clinics in Manmunai North Batticaloa. Frequency analysis was used to understand the sample profile and descriptive statistics were used to investigate the level of service quality and customer value in the Medical Clinics. The Pearson correlation was applied in order to test the correlation that was concerned with the relationship between service quality and customer value. Regression analysis was also used to test the impact of service quality on customer value at Medical Clinics in Manmunai North Batticaloa.

The first objective of this study is to identify the levels of service quality and customer value. The results of the study showed that service quality is high. As well as each of the existing levels of the independent variable dimensions, such as tangible, reliability, responsiveness, assurance, and empathy indicated that there is a high level of tangible, reliability, responsiveness, assurance, and empathy.
Further, the finding of this study shows that there is a high level of customer value among those who are using Medical Clinics in Manmunai North Batticaloa.

The second objective of this study is to examine the relationship between the dimensions of service quality and customer value. The results of the correlation analysis indicated that there is a strong positive correlation between service quality and customer value, as well as each of the service quality dimensions, such as tangible, reliability, responsiveness, assurance, and empathy indicated a strong positive correlation with customer value.

The third objective of this study is to identify the impact of service quality on customer value. The results of a regression analysis indicated that there is a positive significant impact of service quality on customer value. The results of the multiple regression analysis revealed that customer value is influenced by service quality dimensions such as tangible, reliability, responsiveness, assurance, and empathy. The result of the multiple regression analysis indicated that there is a positive significant impact of tangibles, reliability, responsiveness, assurance, and empathy on customer value. Therefore, the empirical gap in the problem was addressed in this study, "Appraising the service quality of Medical Clinics on customer value in Manmunai North Batticaloa." fulfilled by the findings of the study.
The implication of the finding is that a high level of service quality is positively correlated with customer value. Therefore, it is very important for Medical Clinics to pay attention to establishing service quality in a better way to improve customer value.

A. Recommendation

Service quality is one of the key factors impacting customer value. Medical Clinics can take steps to improve (25% to 30%) their service quality. Tangible, reliability, responsiveness assurance and empathy dimensions were shown to be the strongest. Quality is more likely to represent your organization in a way that ensures increased loyalty, market share, price, reduces errors and efficiency.

B. Limitations of the study

This study has several limitations. The survey was limited to one firm in one geographic division of a single country, which selected customers (patients) who were using Medical Clinics in Manmunai North Batticaloa. The sample representation did not fairly represent the overall Sri Lankan demographics. It should be considered other aspects of the customer value variable in addition to the above variable. The scale used to measure the research questions was the five-point Likert scale. If a seven-point scale were used, a more accurate measurement would have been taken for each variable. The data collected through a single measurement tool is survey-based questionnaires of the quantitative approach. Using qualitative research approaches such as interviews and observation, it will be effective to get more explanation.

C. Direction for the future studies

In this study, the researchers focused on the impact of service quality on customer value. Future research directions should find out the other variables such as price fairness, ethical practice, customer loyalty, customer satisfaction, corporate image, customer trust and control variables used in this study when investigating the links between service quality and customer value in Medical Clinics. Future research should include more variables that can better understand its effects on customer value. And the researcher may incorporate the dimensions of the overall customer value, such as functional value, social value, emotional value, epistemic value, and conditional value.
In future studies, not only will we focus on the selected six Medical Clinics in Manmunai North Batticaloa, but we can also conduct studies in the hospitality and banking industries (multiple industries) and we can include other selected Medical Clinics in Manmunai North Batticaloa or other districts at the national level that can be incorporated. Thus, in order to generalize its results, it is recommended that future researchers do similar research in the geographic area.
The research only considers 240 respondents. Therefore, in future studies, this should be conducted with more respondents to achieve accurate conclusions about this research, and the study can be enhanced while considering that a large sample size as well as both quantitative and qualitative data should be used to enhance this framework.
This research was designed on a cross-sectional basis, which means that data was collected from respondents at a particular period of time. Therefore, there is a bias about causal relationships between variables. Thus, future research will be recommended to use longitudinal designs in order to avoid causal relationship biases in the future.

REFERENCES

[1] Altuntas, S., Dereli, T., & Yilmaz, M. K. (2012). Multi-criteria decision making methods based weighted SERVQUAL scales to measure perceived service quality in hospitals: A case study from Turkey. *Total Quality Management & Business Excellence*, *23(11-12)*, 1379-1395.

[2] Annamalah, S., & Tan, K. Y. (2016). An Analysis of Customer Satisfaction Towards Technical Services in Malaysian Automative Industries. *SSRN Electronic Journal*.

[3] Bahadori, M., Raadabadi, M., Jamebozorgi, M. H., & Salesi, M. (2014). Measuring the quality of provided services for patients with chronic Kidney disease. *Nephro-Urology Monthly, 6(5)*, 656-663.

[4] Bashir, M. A., Ali, M. H., Wai, L. M., Hossain, M. I., & Rahaman, M. S. (2020). Mediating Effect of Customer Perceived Value on the Relationship between Service Quality and Customer Satisfaction of E-Banking in Bangladesh. *International Journal of Advanced Science and Technology, 29(2)*, 3590-3606.

[5] Blois, K. (2004). Analyzing exchanges through the use of value equations. *Journal of Business & Industrial Marketing, 19 (4)*, 250-257.

[6] Chang, H. S. (2008). Increasing hotel customer value through service quality cues in Taiwan. *The Service Industries Journal, 28 (1)*, 73-84.

[7] Cronin, J. J., Jr, Brady, M. K., Brand, R. R., Jr, R. H., & Shemwell, D. J. (1997). A cross-sectional test of the effect and conceptualization of service value. *The Journal of Services Marketing, 11 (6)*, 375-391.

[8] Dubey, P., & Sahu, S. K. (2019). Effect of Service Quality on Perceived Value, Satisfaction, Loyalty y of Customers: A Study on Selected Hospitals of Chhattisgarh. *International Journal of Computer Sciences and Engineering, 7(3)*, 55-62.

[9] Elliott, A. C., & Woodward, W. A. (2016). *IBM SPSS by Example: A Practical Guide to Satistical Data Analysis (2nd Edition)*. London: SAGE Publication.

[10] Firmansyah, M. A., & Fatihudin, D. (2019). Product Packaging Analysis Using View Model on Consumer Purchasing Decision of Fruit Flavored Drinks Product in Surabaya. *Sinergi, 9 (1)*, 11-17.

[11] Guhl, D., Blankart, K. E., & Stargardt, T. (2019). Service quality and perceived customer value in community pharmacies. *Health Services Management Research, 32 (1)*, 36-48.

[12] Gutman, J. (1982). A means-end chain model based on consumer categorization processes. *Journal of Marketing, 46(2)*, 60-72.

[13] Hamenda, A. (2018). An Integrated of Service Quality, Price Fairness, Ethical Practice and Customer Perceived Values for Customer Satisfaction of Sharing Economy Platform. *International Journal of Business and Society, 19 (3)*, 709-724.

[14] Heri, H. (2017). Analysis the Effect of Service Quality, Customer Value, Customer Satisfaction and Customer Trust on Corporate Image. *IOSR Journal of Business and Management, 19(6)*, 38-46.

[15] Irfan, S. M., & Kee, D. M. (2012). Service Quality and Rail Transport in Pakistan: A Passenger Perspective. *World Applied Sciences Journal, 18 (3)*, 361-369.

[16] Kalaja, R., Myshketa, R., & Scalera, F. (2016). Service quality assessment in health care sector: The case of Durres public hospital. *Procedia- Social and Behavioral Sciences, 235*, 557-565.

[17] Ladhari, R. (2009). A review of twenty years of SERVQUAL research. *International Journal of Quality and Service Sciences, 1(2)*, 172-198.

[18] Maftuchah, V., Ghofir, A., Sabil, & Riftiasari, D. (2019). Consumer Satisfaction Online Ojek Services In Indonesia Effect Of Service Quality And Customer Value. *Archives of Business Research, 7 (12)*, 116-125.

[19] Mohamed, B., & Azizan, N. A. (2015). Perceived service quality's effect on customer satisfaction and behavioral Compliance. *International Journal of Health Care Quality Assurance, 28(3)*, 300-314.

[20] Negi, R. (2009). Determining customer satisfaction through perceived service quality: A study of Ethiopian mobile users. *International Journal of Mobile Marketing, 4 (1)*, 31-38.

[21] Papanikolaou, V., & Zygiaris, S. (2014). Service quality perceptions un primary health care centres in Greece. *Health Expectations, 17(2)*, 197-207.

[22] Parasuraman, A., Zeithaml, V. A., & Berry, L. L. (1985). A conceptual model of service quality and its implications for future research. *Journal of Marketing, 49 (4)*, 41-50.

[23] Sekaran, U. (2003). *Research Methods for business (4th ed)*. United States of America: John Wiley & Sons, Inc.

[24] Serna, A., Casellas, A., Saff, G., & Gerrikagoitia, J. K. (2018). BIG DATA AND SERVICE QUALITY. *Quality Services and Experiences in Hospitality and Tourism, 9*, 213-227.

[25] Sheth, J. N., Newman, I. B., & Gross, B. L. (1991). Why We Buy What We Buy: A Theory of Consumption Values. *Journal of Business Research, 22*, 159-170.

[26] Sivanenthira, S., & Kumaradeepan, V. (2015). The Impact of Service Quality on Consumer Perceived Value in medical Clinics. *Journal of Marketing and Consumer Research, 8*, 21-26.

[27] Surydana, L. (2017). Service Quality, Customer Value and Patients Satisfaction on Public Hospital in Bandung District, indonesia. *International Review of Management and Marketing, 7 (2)*, 187-192.

[28] Tam, J. L. (2004). Customer satisfaction, service quality and perceived value: An integrative model. *Journal of Marketing Management, 20(7-8)*, 897-917.

[29] Upadhyai, R., Jain, A. K., Roy, H., & Pant, V. (2019). A Review of Healthcare Service Quality Dimensions and their Measurement. *Journal of Health Management, 21 (1)*, 102-107.

[30] Wang, Y., Yang, Y., & Lo, H. P. (2004). An Integrated Framework for Service Quality, Customer Value, Satisfaction: Evidence from China's Telecommunication Industry. *Information Systems frontiers, 6 (4)*, 325-340.

[31] Wilson, A., Zeithaml, V., Bitner, M. J., & Gremler, D. (2016). *Service marketing: Integrating customer focus across the firm*. Uk: McGraw Hill.,