

<b>Name:</b>	
<b>Enrolment No:</b>	

**UNIVERSITY OF PETROLEUM AND ENERGY STUDIES**  
**End Semester Examination, December 2018**

<b>Course: Management of Service organization</b>	<b>Semester:III</b>
<b>Programme: BBA CORE</b>	<b>CC: MKTG2010</b>
<b>Time: 03 hrs.</b>	<b>Max. Marks: 100</b>
<b>Instructions:</b>	

**SECTION A**

<b>Q 1</b>	<b>Attempt All FIVE:</b>	<b>30</b>	<b>CO</b>
<b>A</b>	Explain the Service concept.	5	2
<b>B</b>	What is performance management?	5	1
<b>C</b>	Write a short note about Service process..	5	1
<b>D</b>	List out the complexities in delivery of services.	5	2
<b>E</b>	List and brief about any four health care services.	5	4
<b>F</b>	What is Service strategy?	5	1

**SECTION B**

<b>Q 2</b>	<b>Attempt All FOUR:</b>	<b>40</b>	
<b>A</b>	Why Customer expectation are not fulfilled in services. Discuss.	10	3
<b>B</b>	What is service Culture? Explain its elements in detail.	10	2
<b>C</b>	Enumerate the significance of people in service Industry.	10	4
<b>D</b>	Elaborate the types of service operations.	10	1

**SECTION-C**

<b>Q 3</b>	<b>Case Study:</b>	<b>30</b>	<b>4</b>

Marketing of Health Services Pulin Kayastha was simply amazed. He had seen all forms of hostility and marketing warfare in the consumer goods industry, but to see similar warfare in the health industry fascinated him. Clearly, he told himself, doctors had found consumers in their patients. At least, that's what the concept note sent by Dr. Ajit Varman, country manager of Recovery Clinics and Hospitals, seemed to indicate. Varman and seven other senior doctors had left Karuna Nursing Home and Hospital to set up Recovery, which, as the note said.".... would be entirely devoted and dedicated to customer responsiveness." Pulin was a management consultant and was recommended to Recovery by the marketing director of Regrow Pharma, a large pharmaceuticals company in Mumbai. In fact, the suggestion to set up Recovery came from a

non - resident patient, Dinesh Shah, who was undergoing treatment at Karuna's large speciality hospital in Central India. It was in the course of his interaction with the doctors that Shah sensed their unhappiness with the system. This prompted him to suggest the idea of Recovery. Varman had joined Karuna 10 years ago, assured of a challenging career in a hospital that was promising to be different. But over time, disillusionment set in as Karuna's image and response to the environment diluted its equity. "Now that we have decided to do this, we do not want to repeat old mistakes," Varman had told Pulin during their first meeting. "Having worked at Karuna, we can see its weaknesses and why it's losing saline. Ten years ago, when it was established, we believed it was going to add value to our careers. We became a part of it because we were told that we are specialists who would bring exclusivity to the hospital. But soon, the focus shifted to fetching business and revenues.

The management started hiring specialists and private practitioners, offering them cabins and consultancy arrangements at Karuna. The strategy was that these doctors would bring in their patients and use the infrastructure so that the hospital would start earning money."

The Karuna management wanted to derive short - term benefits, rather than gradually build up clientele. But the strategy, it appeared, did not pay off. As Varman said: "Because there were many doctors and the business was not large enough in the first few months. Consequently, competition for business became cut - throat between doctors." marketing plan. What we want you to do is to help us build this brand, help ordinary doctors like us understand what brand-building entails and how it is managed in a service industry."


<b>A</b>	Suggest a positioning strategy for Recovery Clinics and Hospitals.	<b>10</b>	
<b>B</b>	What steps might Recovery Clinics and Hospitals take to demonstrate reliability, responsiveness, assurance and empathy?	<b>10</b>	
<b>C</b>	Explain why it is necessary for doctors as well as nursing staff to be marketing oriented.	<b>10</b>	

**CONFIDENTIAL**

<b>Name of Examination</b> <small>(Please tick, symbol is given)</small>	:	<b>MID</b>		<b>END</b>	✓	<b>SUPPLE</b>	
<b>Name of the School</b> <small>(Please tick, symbol is given)</small>	:	<b>SOB/SOL</b>		<b>SOB/SOL</b>	<b>SOB</b>	<b>SOB/SOL</b>	
<b>Programme</b>	:	<b>BBA- Core</b>					
<b>Semester</b>	:	<b>III</b>					
<b>Name of the Course</b>	:	<b>Management of service Organization</b>					
<b>Course Code</b>	:	<b>MKTG2010</b>					
<b>Name of Question Paper Setter</b>	:	<b>Jitendra Kumar Yasholiya</b>					
<b>Employee Code</b>	:	<b>Visiting Faculty</b>					
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<b>Note: Please mention additional Stationery to be provided, during examination such as Table/Graph Sheet etc. else mention "NOT APPLICABLE":</b>							
<b>FOR SRE DEPARTMENT</b>							
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**Note: - Pl. start your question paper from next page**

**Model Question Paper (Blank) is on next page**

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Time: 03 hrs. Max. Marks: 100			
Instructions:			
<b>SECTION A</b>			
<b>Q 1</b>	<b>Attempt All FIVE:</b>	<b>30</b>	<b>CO</b>
<b>A</b>	What is Market Segmentation?	<b>5</b>	<b>1</b>
<b>B</b>	What is Service Strategy?	<b>5</b>	<b>1</b>
<b>C</b>	What is performance management?	<b>5</b>	<b>1</b>
<b>D</b>	Write a short note about Service process..	<b>5</b>	<b>2</b>
<b>E</b>	List out few important reason of customer Satisfaction.	<b>5</b>	<b>3</b>
<b>F</b>	What are the various ways by which service can be classified?	<b>5</b>	<b>4</b>
<b>SECTION B</b>			
<b>Q 2</b>	<b>Attempt All FOUR:</b>	<b>40</b>	
<b>A</b>	Discuss in detail 360 degree of services delivery management.	<b>10</b>	<b>3</b>
<b>B</b>	What do you understand by the term Service Quality? Is good service quality a cost or a revenue provider? Illustrate with the help of examples.	<b>10</b>	<b>4</b>
<b>C</b>	What is Service Culture? Explain its elements in detail.	<b>10</b>	<b>2</b>
<b>D</b>	What are the steps for choosing target market segmentation?	<b>10</b>	<b>4</b>
<b>SECTION-C</b>			
<b>Q 3</b>	<b>Case Study:</b>	<b>30</b>	<b>4</b>

Mrs. F arrives 15 minutes early for a 1:30 PM appointment with her Austin, Texas, ophthalmologist, Dr. X. The waiting room is empty and all the prior names on the sign-in-sheet are crossed out. The receptionist looks up but does not acknowledge her presence. Mrs. F, unaware of the drama about to unfold, happily anticipates that she may not have to wait long beyond her scheduled time and settles into a chair to read the book she has brought with her. Large windows completely surround three sides of the waiting room. The receptionist sits behind a large opening in the remaining wall. Attractive artwork decorates the available wall space, and trailing plants rest on a shelf above the receptionist's opening. It is an appealing, comfortable waiting moment. At 1:25 PM, another patient, Jack arrives. Mrs. F knows his name must be Jack,

because the receptionist addresses him by first name and the two share some light-hearted pleasantries. Jack takes a seat and starts looking through a magazine. At 1:40 PM, a very agitated woman enters and approaches the receptionist. She explains that she is very as she missed her 1 o'clock appointment and asks if it would be possible for Dr. X to see her anyway. The receptionist replies very coldly, "You're wrong. Your appointment was for 11." "But I have 1 o'clock written down!" responds the patient, whose agitation now has changed to distress. "Well, you're wrong" "Oh dear, is there any way I can be worked in?" pleads the patient. "We'll see. Sit down." Mrs. F and her two "companions" wait until 1:50 PM, when staff person number 2 (SP2) opens the door between the waiting room and the hallway leading to the various treatment areas. She summons Jack, and they laugh together as she leads him to the back. Mrs. F thinks to herself, "I was here first, but maybe he just arrived late for an earlier appointment," then goes back to her book. Five minutes later, Ms. SP2 appears at the door and summons the distressed patient. At this point, Mrs. F walks to the back area (She's a long-time patient and knows the territory), seeks out Ms. SP2 and says, "I wonder if I've been forgotten. I was here before those two people who have just been taken in ahead of me." Ms. SP2 replies very brusquely, "Your file's been pulled. Go sit down." Once again occupying an empty waiting room, Mrs. F returns to her reading. At 2:15 PM (no patient has yet emerged from a treatment area), Ms. SP2 finally summons Mrs. F and takes her to room 1, where she uses two instruments to make some preliminary measurements of Mrs. F's eyes. This is standard procedure in Dr. X's practice. Also standard is measuring the patient's present eyeglass prescription on a third instrument in room 1. Mrs. F extends her eyeglasses to Ms. SP2, but Ms. SP2 brushes past her and says curtly, "This way." Mrs. F then is led to a seat in the "dilating area," although no drops have been put in her eyes to start dilation. The light in the dilating area is dimmed to protect dilating eyes, but Mrs. F is able to continue reading her book. No one else is seated in the dilating area. At 2:45 PM, Ms. SP2 reappears, says, "this way" (a woman of very few words, our Ms. SP2), and marches off to examining room 3. "Wait here," she commands, leaving Mrs. F to seat herself in the darkened room. Mrs. F can hear Dr. X and Jack laughing in the next examining room. At 2:55 PM, she hears the two men say good-bye and leave the room. Mrs. F expect Dr. X to enter her room shortly. At 3:15 PM, however, when he still has not appeared, she walks forward and interrupts Ms. SP2, the receptionist, the bookkeeper, and Ms. SP3, who are socializing. "Excuse me, but have I been forgotten?" She asks. Ms. SP2 turns her head from her companions and replies, "No, he's in the line. Go sit down."

Mrs. F wonders what that means but returns to her assigned place. She is here, after all, for a particular visual problem, not just for a routine check-up. All good things, however, including Mrs. F's patience and endurance of abusive treatment, eventually end. At 4:00 PM, Mrs. F does some marching of her own-to the front desk, where she announces to the assembled Mss. SP1 through SP4 that she has been waiting since 1:30 PM, that she has been sitting in the back for 2 and half hour, and that not once during that time has one member of the staff come to let her know what the problem is, how much longer she can expect to wait, or, indeed, that she has not been forgotten. She adds that she will wait no longer, and she feels forced to seek the services of a physician who chooses to deliver health care. There are several patients seated in the waiting room at the time. There is an epilogue to this case. Mrs. F went directly home and wrote the following letter to Dr. X informing him of the treatment she had (not) received at his office and stating that she and her family would seek care elsewhere.

January 5, 2005,

Dear Dr,

It is with very real regret that I am transferring our eye care to another physician, and I want you to know the reason for my decision. It is 4:22 PM, and I have just returned home from a 1:30 PM appointment with (out) you. The appointment was made because I had received an adverse report from Seton Hospital's recent home vision test. I was kept waiting in the dilation area and in examining room 3 for more than two-and-one-half hours, during which time not one single member of your staff gave me any explanation for the delay or assured me I had not been forgotten. When I finally asked if I were forgotten, I was treated with a very bad attitude ("how dare I even ask") and still was given no reason for the delay or any estimate of how much longer I would have to wait. Consequently, I left without seeing you. As I stated above, I make this change with very real regret, because I value your expertise and the treatment you personally have given the four of us during these past many years. But I will not tolerate the callous treatment of your staff.

<b>A</b>	What features of a good waiting process are evident in Dr. X's practice? List the shortcomings that you see.	<b>10</b>	
<b>B</b>	How could Dr. X prevent such incidents in the future and also how the doctor should respond to the letter received.	<b>10</b>	
<b>C</b>	What are the benefits to an health care service organization in retaining its customers?	<b>10</b>	