

SVM 04

Services Management.

Roll No.

Total No. of Printed Pages: 4

Total No. of Questions : (Section 1 = 2)
(Section 2 = 3)

Total Maximum Marks : 60

Duration (hrs.) : 3

Section : 1 (30 Marks)

Note: Section 1 & 2 to be solved on separate answer booklet.

Q1. Answer any 2 of the following: (2*10 = 20 Marks)

- What are the barriers for firms to break the cycle of failure and move into the cycle of success? And how should an organization trapped in the cycle of mediocrity proceed?
- Explain the 8 Ps of service marketing with an example & explain the importance of TIME in service industries?
- Explain the stages in New Service development?

Q2. Read the caselet carefully and answer the following questions:

Despite recent economic advances, India is not a good country in which to suffer an injury. Hundreds of thousands of people are seriously hurt and/or perish in accidents in the country each year. Too many die simply because of time; hours sometimes elapse before accident victims arrive at a hospital. Moreover, India lacks a single emergency phone number, unlike the U.S. (911) and the European Union (112). Consequently, precious time is lost while emergency numbers are looked up. Meanwhile, the need for quality emergency services continues to rise. Traffic accidents, crime resulting in injury, and birth-related emergencies, among others increase every year.

Several years ago, Satyam Chairman Ramalinga Raju recognized the need for a state-of-the-art emergency response system to help injured people quickly. As a result, he and his brother, Ramu, formed the Emergency Management and Research Institute (EMRI), a not-for-profit entity that provides emergency management and training, and conducts research related to emergencies. The program's goal is ambitious, yet simple: to become the world's best emergency management organization.

To begin, EMRI registered with the government of Andhra Pradesh (AP) in an innovative public/private partnership. Then, EMRI officials approached the Government of India for a single, toll-free number. They were given 108, a number previously reserved for emergency and disaster management. Immediately, 10 million people in five major AP cities had access to enhanced emergency service by dialing 108. And every day, more people gain access. EMRI and Satyam created a system that automates numerous critical call center activities: reaching the emergency site by vehicle (police, fire, medical); tracking ambulances (for medical cases); monitoring emergency care; informing police; and integrating voice-logging systems for audio replay. Additionally, EMRI makes a physician available in the call center at all times. It also operates 30 Advanced Life Support (ALS) and 40 Basic Life Support (BLS) ambulances, which feature the latest technology and communications equipment.

The free solution is accessible 24 hours a day, by all AP residents, and handles more than 1 million calls per year, and saves thousands of lives every month. Additionally, it is taking root in other Indian states—quickly. By 2010, EMRI aims to be established throughout the subcontinent. At that point, it will likely save more than 1 million lives annually. Furthermore, the technology EMRI leverages continues to improve. While most ambulances feature telephone and radio contact to the doctor on duty in Hyderabad, a growing number are equipped with videoconferencing capabilities, enabling the physician to see patients—and get a better idea of the extent of their injuries—while they are en route to the hospital.

Simply put, EMRI gives life. There can be no greater opportunity or advantage. Hundreds of thousands of people in India succumb to injuries each year. Huge percentages of these people would be saved if the entire country had emergency response systems similar to those in Western nations, such as the US, Canada, and most of Europe. In AP, they do, fortunately, so thousands of people who probably would have died without Call 108—an estimated 12,098 in 2006 and 20,000 in 2007 have been saved.

In most of India, however, achieving emergency response is not as simple as dialing three digits. Police and fire departments and hospitals all have individual phone numbers, which vary from place to place. As such, people—often the injured themselves—must look up appropriate phone numbers, if they can, and call for help. Critical time is lost while numbers and land-line phones are found. Even more time elapses while emergency vehicles make their way to the people who need them.

Additionally, many people (notably a good number of the country's 700 million people who live in poverty), are reluctant to call for emergency services, because they worry about costs. EMRI's Call 108 service, however, is free. Asking for an ambulance is also free, as is a patient's first 24 hours in an affiliated hospital. As a result, AP residents need not decide between feeding their families.

Moreover, the solution is not restricted to AP. As noted it is also being rolled out in other Indian states. The solution has brought about entirely new and dramatically improved ways of responding to emergencies, especially in poorer areas of India. In addition, it has actually surpassed 911 and 112, from a comprehensive services standpoint. The approach integrates entire ecosystems—governments, private hospitals, diagnostic labs, pharmacies, insurance companies, telemedicine professionals, etc.—to expedite and improve the delivery of treatment to larger groups of people. At the same time, it reduces costs.

Thanks to its ability to identify the precise location of callers via GPS, is even more robust than 911, its North American counterpart. It enables police, paramedics, and doctors to work in synchronization as an ambulance is dispatched, ensuring exceptional treatment from the time care begins through recovery. Moreover, ambulances are extremely well equipped—they feature “telemedical” capabilities that allow doctors to see patients on a monitor as they are transported to the closest hospital in a vast network, facilitating fast, continuous, exceptional care.

The ambulances' most valuable feature, however, may be the highly trained professionals who staff them.

Questions:

- A. “Having the right marketing mix to market the services of the healthcare industry is very important. Using the right balance of marketing elements, marketers can ensure that their marketing efforts fetch them the expected results.” In this regard, explain how Satyam can use the marketing mix to enhance the services provided by EMRI's Call 108. (5 marks)
- B. What would be the communication strategies to market this service?
(2 Marks)
- C. What is the role of Market Research in a Service industry & which tools would you recommend to conduct MR in a Health Care Industry? (3 Marks)

Section: 2

Total No. of Questions: 3

Maximum Marks: 30

Note :All the three questions are compulsory, although there are internal choices in all the questions. Each question carries 10 marks.

Q.1. List down the role of each element of service encounter for any two of the following service industries:

- (a) Hospitality Industry (Hotels)
- (b) Entertainment Industry (Multiplexes)
- (c) Health care Industry (Hospitals)

Q.2. Describe each one of the probable seven service quality gaps for any one service sector:

- (a) Telecom
- (b) Education

Q.3. Discuss the different stages in the CRM Processes of any two service sectors industries:

- (a) Tourism
- (b) Banking
- (c) Hospitality