

Research on the improvement path of home care service quality in urban communities from the perspective of customer perception—Take L community in Guilin City as an example

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Abstract: With the development of The Times, people's living conditions continue to be improved, the average life expectancy continues to extend, accompanied by a deepening degree of aging society, the whole society is bearing the huge pressure of pension, leading to the traditional family pension function weakening and institutional pension model is no longer applicable, community home pension service model began to get on the pension "stage". Under the background of the report of the Party's Twenty National Congress of "implementing the national strategy to actively cope with the aging population", the paper tries to understand the current situation of home care service in Guilin urban community from the perspective of customer perception service quality theory, in order to find out the existing problems in the process of home care service in Guilin urban community through analysis, and put forward relevant suggestions to improve the service quality.

Keywords: Customer perception service quality theory; Urban community home care; Aging population

1. Introduction

According to the data from the 7th National Population Census, the degree of aging population in China is constantly deepening, and the issue of "how the elderly care for the elderly" has received widespread attention from the whole society. Faced with the gradual weakening of family elderly care functions and the increasing cost of institutional elderly care, many "421" families in cities have to seek help from the community. In this context, community home-based elderly care services have begun to enter people's lives. Community home-based elderly care services are based on the community, providing elderly care services and products for the elderly living in the community or at home, so that they can enjoy elderly care services without leaving their original place of residence ^[1]. According to the seventh national population census data, the proportion of people aged 60 and above in Guilin is 20.33%, and the proportion of people aged 65 and above is 14.82%. Compared with the sixth national population census data, the proportion of people aged 60 and above has increased by 4.3 percentage points, and the proportion of people aged 65 and above has increased by 3.65 percentage points^[4]. This indicates that the aging of Guilin's population is further deepening. Therefore, this article selects L Community in Guilin City as the research scope, with a total of 1360 households, of which the population aged 60 and above accounts for 70% of the community's permanent population. There is a public-private joint community home-based elderly care service center in the community. After field research, it was found that Guilin, as an international tourist city with an increasingly aging population, has shown a phenomenon of low service quality in the development of community home-based elderly care services, leading to the inability of the elderly to enjoy high-quality elderly care services normally. Therefore, this article attempts to use Grolus' theory of customer perceived service quality to think about how to improve the quality of community home-based elderly care services in Guilin city, in order to provide practical cases for the research of community home-based elderly care, and ensure that the elderly in the whole society can share the people's well-being brought by the comprehensive well-off society in the new era.

2. The Connotation and Applicability of Customer Perceived Service Quality Theory

2.1 The Connotation of Customer Perceived Service Quality Theory

Introducing quality into the service field, research on service quality began in the late 1970s. [2]Swedish service marketing expert Grolus was the first to propose the concept of customer perceived service quality. He believes that service quality is a subjective category that depends on the comparison between customers' expectations of service quality (i.e. expected service quality) and their actual perceived service level (i.e. experienced service quality). He divides the form of service quality into process and result, and both are influenced by customers' subjective feelings. At the same time, the two are the distance between the inner expectations of service recipients and the actual service level. When the actual level of service received by the service recipient is higher than their inner expectations, then the service recipient is satisfied with the service, while the opposite is a very low level of satisfaction [6]. Grolus concluded through comparative analysis that the indicators of its "customer perceived service" mainly include five aspects: reliability refers to the service personnel being able to complete their work and business with dedication and dedication; Tangibility refers to the ability to make customers feel explicit services during the service process, so that customers can identify different services; Responsiveness refers to the ability to quickly and accurately provide beneficial services as soon as customers express their needs; Guarantee refers to the efficient work ability, serious and responsible work attitude, as well as solid professional knowledge and ability of service personnel, in order to enhance customer trust; Empathy refers to the ability of service personnel to stand from the customer's perspective, sincerely consider the customer's actual situation, fully consider the customer's needs as much as possible, and make the customer feel human when receiving service.

2.2 Applicability in the process of community home-based elderly care services

In the process of community home-based elderly care services, social workers play the role of the "main force", adhering to the basic principle of "helping others and helping themselves", and providing professional services. In the process of helping others, social workers are the main actors who design and guide the process of helping others. However, due to the fact that social workers need to consider the needs of beneficiaries and their ability to receive services in order to carry out services, beneficiaries cannot be seen as purely passive and merely recipients of services. In fact, the recipient is also the subject of action, bringing their own consciousness, purpose, and understanding of the actions of social workers into the process of receiving help, and directly influencing the progress of this process. [3]Overall, when providing services to beneficiaries, social workers should fully consider their actual needs and feelings towards the service, rather than simply treating them as weak recipients of the service, but as one of the actors in the service process. The way social workers think about problems from the perspective of service recipients is consistent with Grolus's view of focusing on customer actual needs. Therefore, applying the theory of customer perceived service quality to the study of improving the quality of community home-based elderly care services has strong applicability.

3. Research design and evaluation results

3.1 Research methods

This study used a non random quota sampling method to select 20 elderly people aged 60 and above who purchased community home-based elderly care services in L Community, Guilin City, for household interviews and field observations. The interview methods were a combination of unstructured and structured interviews. The author conducted structured interviews with elderly people based on pre designed evaluation indicators for the quality of community home-based elderly care services, and conducted unstructured interviews with their family members on the topic of community home-based elderly care services, in order to understand the current situation of the development of home-based elderly care services in the L community of Guilin City and accumulate rich first-hand information for subsequent research.

3.2 Indicator design

Based on the five dimensions of reliability, tangibility, responsiveness, assurance, and empathy proposed by Grolus in the theory of customer perceived service quality, combined with the five aspects

of community home-based elderly care services in L community, including meal assistance, cleaning assistance, medical assistance, entertainment, and care, the designed service quality evaluation indicators (as shown in Figure 1) are as follows:

3.2.1 Reliability dimension

In terms of meal assistance, we are dedicated to providing meals for the elderly; In terms of cleaning assistance, we are dedicated to providing cleaning services for the elderly; In terms of medical assistance, we are dedicated to providing medical services for the elderly and ensuring the convenience of community medical services; In terms of entertainment, we are dedicated to designing services from the perspective of the elderly; In terms of care, it is dedicated to providing spiritual comfort services for the elderly.

3.2.2 Tangibility dimension

In terms of meal assistance, it provides explicit and good catering services for the elderly; In terms of cleaning assistance, we are dedicated to making explicit changes to the hygiene and greenery of the living environment for the elderly; In terms of medical assistance, it is equipped with comprehensive and explicit medical services; In terms of entertainment, community home-based elderly care service centers have complete entertainment equipment; In terms of care, there are practical services that respond to the spiritual comfort needs of the elderly

3.2.3 Responsiveness dimension

In terms of meal assistance, it is a requirement from the elderly for catering, and service personnel can respond promptly; In terms of cleaning assistance, it is a cleaning requirement for the elderly, and service personnel are kind, patient, and timely in handling it; In terms of medical assistance, elderly people who are feeling unwell can be quickly rescued by service personnel; In terms of entertainment, it is necessary to adjust activity plans in a timely manner to meet the entertainment needs of the elderly; In terms of care, when elderly people need to confide, service personnel should respond promptly.

3.2.4 Guarantee dimension

In terms of meal assistance, it is necessary to disinfect the tableware used by the elderly to ensure their food safety; In terms of cleaning assistance, it is important to promptly place cleaning supplies and items to prevent elderly people from tripping over; In terms of medical assistance, medical staff have professional qualifications and rich experience to ensure the effectiveness of medical care for the elderly; In terms of entertainment, service personnel regularly inspect the safety of entertainment facilities to ensure the safety of activities; In terms of care, professional and experienced social workers are equipped to ensure that the spiritual needs of the elderly are met in a timely and efficient manner.

3.2.5 Empathetic dimension

In terms of meal assistance, it is able to reasonably match the diet according to the preferences and physical condition of the elderly; In terms of cleaning assistance, it respects the personal habits and actual cleaning needs of the elderly; In terms of medical assistance, healthcare services are reasonably formulated based on the physical condition of the elderly; In terms of entertainment, corresponding entertainment services are provided based on the interests and hobbies of the elderly; In terms of care, it is the ability to think from the perspective of the elderly and have empathy when providing spiritual comfort services.

3.3 Results of service quality assessment

In terms of meal assistance, the elderly cafeteria in community home-based elderly care service centers did not prepare meals for the elderly wholeheartedly, and the meals provided to the elderly were basically lacking in necessary nutrients; The catering service personnel did not have specific service details and their service attitude was unfriendly, failing to make the elderly feel explicit and good service; Service personnel may use tight working hours as an excuse to fail to respond promptly to elderly people's requests for catering; Staff disinfect tableware used by the elderly in a timely manner; The service center only follows the recipes recommended by the nutritionist, ignoring the true dietary needs of the elderly, resulting in a slight deviation in the nutritional value of the food from what the elderly expect.

In terms of cleaning assistance, service personnel selectively fulfill the cleaning needs of the elderly and fail to provide cleaning services to them wholeheartedly; When staff come to provide services, they

can basically pay attention to the hygiene and greenery of the living environment for the elderly; Service personnel are generally able to patiently and promptly handle cleaning issues for the elderly; After the cleaning staff completes their work, they are generally able to store cleaning supplies and items in a timely manner; When providing cleaning services, the personal habits and actual needs of the elderly are overlooked.

In terms of medical assistance, the medical care room of the service center cooperates with county-level traditional Chinese medicine hospitals, with fewer medical staff and only one day a week for on-site services. For most elderly people, medical services lack convenience; Medical services are set up according to the health needs of the elderly, but they lack comprehensive medical services and are rarely implemented; When elderly people are feeling unwell, service personnel are generally able to quickly carry out rescue operations; When providing medical services, service personnel tend to follow a unified healthcare plan and fail to design personalized services based on the needs of the elderly.

Table 1: Quality Score Table of L Community Home-based Elderly Care Services

evaluate theme	evaluate dimension	Evaluation content	P	E	SQ
Meal assistance	reliability	Devote oneself to providing delicious and healthy meals for the elderly.	3.7	4.5	-0.8
	tangibles	Provide explicit and good catering services for the elderly.	3.5	4.6	-1.1
	Responsiveness	Elderly people's demands for catering can be responded to in a timely manner.	3.6	4.8	-1.2
	Guarantee	Disinfect tableware used by elderly people.	3.5	4.3	-0.8
	empathy	Reasonably match according to the preferences and physical condition of the elderly.	3.5	4.6	-1.1
	comprehensive		3.6	4.6	-1.0
Assisting in cleaning	reliability	Dedicated to providing cleaning services for the elderly.	4.5	4.9	-0.4
	tangibles	Make explicit changes to the living environment for the elderly.	4.2	4.5	-0.3
	Responsiveness	Patient and timely handling of cleanliness requirements for the elderly.	3.9	4.8	-0.9
	Guarantee	Dispose of cleaning supplies and items promptly after use.	4.0	4.7	-0.7
	empathy	Respect the personal habits and actual cleaning needs of the elderly.	3.5	4.6	-1.1
	comprehensive		4.0	4.7	-0.7
Medical assistance	reliability	Dedicated to providing convenient medical services for the elderly.	3.5	4.9	-1.4
	tangibles	Configure and implement comprehensive and explicit medical services.	3.6	4.6	-1.0
	Responsiveness	Elderly people in poor health can be quickly rescued by service personnel.	3.5	4.8	-1.3
	Guarantee	Medical staff are professional and experienced.	3.9	4.9	-1.0
	empathy	Reasonably develop healthcare services based on the physical condition of the elderly.	3.6	4.8	-1.2
	comprehensive		3.6	4.8	-1.2
Entertainment	reliability	From the perspective of the elderly and dedicated to designing services.	3.5	4.3	-0.8
	tangibles	The community home-based elderly care service center has complete entertainment equipment.	3.4	4.8	-1.4
	Responsiveness	Timely adjust activity plans to meet the entertainment needs of the elderly.	3.6	4.4	-0.8
	Guarantee	Service personnel regularly check the safety of entertainment facilities	3.5	4.6	-1.1
	empathy	Provide corresponding entertainment services based on the interests and hobbies of the elderly.	3.4	4.5	-1.1
	comprehensive		3.5	4.5	-1.0
solicitude	reliability	Dedicated to providing spiritual comfort services for the elderly.	3.2	4.9	-1.7
	tangibles	Responding to the spiritual comfort needs of the elderly with practical services.	3.1	4.6	-1.5
	Responsiveness	When elderly people need to confide, service personnel should respond promptly.	3.5	4.9	-1.4
	Guarantee	Equip professional social workers to meet the spiritual needs of the elderly.	3.2	4.7	-1.5
	empathy	Service personnel provide comfort services with empathy and empathy skills.	3.1	4.8	-1.7
	comprehensive		3.2	4.8	-1.6
	Overall evaluation of service quality		3.6	4.7	-1.1

In terms of entertainment, service personnel have not been able to design activities from the perspective of the elderly and are rarely fully engaged in organizing activities; The entertainment equipment in the service center only includes puzzle games, small shooting devices, and small sandbags, with limited variety and quantity, which cannot meet the diverse needs of the elderly; Service personnel failed to respond to the entertainment needs of the elderly in a timely manner and adjust activity plans; After organizing the event, the service personnel only carried out simple sorting of entertainment facilities and did not regularly check the safety of the entertainment facilities; The staff have strong subjectivity in activity arrangements and have not been able to provide corresponding entertainment services based on the interests and hobbies of the elderly.

In terms of care, service personnel often overlook or forget the spiritual needs of the elderly, and

fail to provide spiritual comfort services to the elderly wholeheartedly; There is no actual service provided in response to the spiritual needs of the elderly; When elderly people need to confide, the staff fails to see and respond in a timely manner; The social workers equipped have low professionalism and limited practical experience; The service personnel did not have the ability to empathize and empathize when providing mental services, resulting in a failure to provide appropriate communication and emotional comfort services for the elderly.

Based on the above content of home-based elderly care services in L community, the author objectively evaluates its service quality score (out of 5 points). According to the specific scoring results (as shown in Table 1), it can be seen that the overall evaluation of the quality of home-based elderly care services in L community is relatively low, that is, the services received by the elderly (service perception) are far lower than the services expected by the elderly (service expectations).

4. The problems and optimization paths of home-based elderly care services in Guilin L community

4.1 The problems of home-based elderly care services in Guilin L community

4.1.1 Leadership attention is showing a trend of alienation

Attention is a scarce resource, and the development of social organizations is closely related to leadership attention.^[5] The leadership of community home-based elderly care service centers is composed of government functional departments and service center managers, whose attention will to some extent affect the development of community home-based elderly care services. The service personnel of the home-based elderly care service center in the L community show disrespect towards the elderly, fail to think from the perspective of the elderly, fail to provide personalized services based on the actual situation of the elderly, and employ "cutthroat" recruitment during the service process. It can be seen that the leaders of the service center do not attach importance to community home-based elderly care services and their attention tends to be alienated, resulting in a chaotic overall service process A series of related problems such as poor service quality and low efficiency.

4.1.2 Home based elderly care shows path dependence

The development of professional social work in our country has always relied on the development of administrative non professional social work. Community home-based elderly care services belong to the category of elderly social work, and most of the funds come from government financial support. From the current situation of scarce professional workers, limited venues, single entertainment facilities, and low medical convenience, it can be seen that the funding for home-based elderly care service centers in L community is very limited, and the government's financial support is not sufficient, showing a strong path dependence, which leads to insufficient salary and benefits for community home-based elderly care service staff, and a lack of satisfaction in their sense of happiness and belonging, Difficulty in mobilizing work enthusiasm. The poor treatment of professional social workers leads to the loss of social work professionals, and the supply of professional services cannot be guaranteed, resulting in a corresponding decline in service quality.

4.1.3 The service process presents a simple mechanization

During the service process, service personnel should stand from the perspective of the elderly, provide more sense of security, and enhance mutual trust. However, from the neglect of the real needs of the elderly, low responsiveness to various needs of the elderly, and the failure of social work to provide timely spiritual and emotional comfort to the elderly, it can be seen that there is a lack of "simple mechanization" in the process of providing services at home elderly care service centers in L community. At the same time, during the service process, social workers fail to think from the perspective of the elderly, and their ability to empathize and empathize is insufficient, The overall professionalism of the talent team is poor, and the service provided by the staff lacks warmth, resulting in a decrease in the sense of security and trust of the elderly, leading to a decline in service quality.

4.2 Path to optimizing the quality of community home-based elderly care services

Government departments need to build a close leadership attention system, focusing on the growth and development of community home-based elderly care services. The development of urban community home-based elderly care services relies on government support. The government should

correctly position its role in elderly care services, formulate relevant management mechanisms and policies for elderly care services, and urge social service institutions to turn policies into substantive services. In general, government departments need to build a close leadership attention system, and at the same time, the government should play a corresponding supervisory role to promote the reliability of community home-based elderly care services in the process of improving their quality.

5. Conclusions

Creating a favorable development environment for home-based elderly care services requires financial and policy support. In terms of funding, the government has increased efforts to purchase urban home-based elderly care social work services and mobilize social forces to participate in community home-based elderly care services. At the same time, social forces participate in community home-based elderly care services in a form of benign competition, stimulate the vitality of community home-based elderly care services, introduce new impetus for community home-based elderly care services, promote the diversification of service forms, enrichment of service content, and innovation of service activities in community home-based elderly care services. In terms of policies, social workers need to engage in dynamic thinking and advocate for optimized policies to relevant departments in the process of putting policies into practice. To create a favorable development environment for the community home-based elderly care service model, while incentivizing the community home-based elderly care service to enhance the tangibility and responsiveness of the service process, timely respond to the needs of the elderly, and provide different services for them.

The professionalization of home-based elderly care services needs to start from two aspects: first, establishing a professional talent team, and second, improving the quality of the service process. To build a professional talent team, on the one hand, it requires government funding support to provide a good development environment and space for professional talents, while retaining talents; On the other hand, it is also necessary for social service institutions to improve talent recruitment policies and talent management and training systems, ensuring the professionalism of recruited staff and the standardization of service processes. At the same time, service institutions need to establish relevant professional assessment and incentive mechanisms, conduct training for service capability improvement groups, and organize professional theoretical knowledge for service personnel. By improving the professionalism of home-based elderly care services through these aspects, we can enhance the empathy and assurance of the service process.

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