The Research and Management of Patient Expectations of Medical Service Quality

Lulin Zhou, Ying Chen
School of Business Administration
Jiangsu University
Zhenjiang, Jiangsu, China
Email:zll62@126.com

Abstract: This article bases on the concept of patient expectations of medical service quality, analyzes the influencing factors which play important roles in the formation of the expectations, discusses three features of the patient expectations. According to the features of medical service, authors establish and study on the information transmission model of hospital behavior and patient expectations. At last, they put forward some useful methods to achieve the effective management of patients’ medical service quality expectations.

Keywords: hospital; medical service quality; patient expectations; expectations management

International academic began the research on customer expectations in the late 1970s. In 1985, PZB\(^1\) put forward the Gaps Model of service quality for the first time, this model became the theoretical basis for the research of patient expectations of medical service quality. So far, foreign experts has already made lots of achievements in this subject, while that in China, the achievements are still rarely. With the reform of health system and the transition of medical model, competition among hospitals has become even more fierce, how to figure out patient expectations and try to meet these expectations are very important for hospitals sustainable development.

1. Define of patient expectations of medical service quality

Throughout the experts’ research on customer expectations in recent 20 years home and abroad, they are mainly focusing on the customer satisfaction degree evaluation and service quality evaluation. Due to the different visual angles, there are many different defines of customer expectations. In the literatures concerning on “customer satisfaction”, expectations are viewed as predictions made by customers about what is likely to happen during an impending transaction or exchange\(^2,3\). In the literatures concerning on “service quality”, expectations are defined as desires or wants of consumers\(^4\). There are several other experts think expectations are constrained by the performance customers believe is possible based on experiences with real brands, suppliers should provide the service which can meet needs and wants of the customers\(^5\).

Medical service industry holds the commonness of service industry, it also possesses some specific characteristics. For this reason, we should define the concept of patient expectations of medical service quality not only base on the commonness of general service expectations, but also base on the particularity of medical service. In this article, we define patient expectation as before receiving medical service, patient forms a intrinsic standard about the safety, effectiveness, timeliness, appropriateness and accessibility of the service which the medical staff will provide, and then versus the predictive expectations with the actual performance, finally make a judgment on medical service quality.

2. Influencing factors of patient expectations of medical service quality

The formation of patient expectations of medical service quality is influenced by many factors, different factors play different roles in the forming process.

2.1. Hospital image

Hospital image is manifested in the following three aspects: medical quality, environmental facilities and marketing communication, patient forms expectations by comprehensive judging these three aspects. Due to the particularity of medical service, patient pays great attention to the safety of medical service. Medical quality is the most important factor when patient choose a hospital to visit. Studies show that the higher rank of a hospital, or the more professional in some fields of a hospital, the higher expectations patient will form. So we can say, medical quality is one of most important factors when patient forms the expectations.

Environmental facilities are therapeutic environments and equipments which hospitals supply. When facing with a beautiful hospital equipped with advanced equipments, patient will definitely generate much higher
expectations. Kenneth E.Clow, David L. Kurtz, John Ozment[6] proposed that before and after customers receive service, they will find the visible evidences to proof his expectations initially, these evidences will not only affect the level of expectation of service quality, but also affect the react when customers receiving service and their future purchasing willingness.

Marketing communication is information exchange between hospitals and patients, it makes up of tangible communication and intangible communication. Tangible communication means hospitals use the traditional media(e.g., television, magazine, radio, etc) or Internet sites to promote their service ideas and to public their service promises, by using these communication methods to form good patient expectations. Intangible communication means the attitude and wearing of medical staff, these factors always acting on patient’s subconscious, influencing patient expectations and the appraisal of medical service quality.

2.2. Word-of-mouth

Word-of-mouth plays a important roles in the forming process of expectations. Medical service bears the feature of intangible and experience property, so the propagation from relatives or experts will have a great influence on other patients expectations. Besides, due to the highly professional characteristic of medical science, the majority of patients are not so familiar with medical knowledge, so they tend to believe in the publicize from acquaintance. All in all, word-of-mouth usually plays a greater roles in forming patient expectations than the marketing communication made by hospitals.

2.3. Personal needs

Suffering from physiological decease or mental disease is the main reason for patients to visit doctors, so the need for health is the seductive factors when patients receive medical service. Different needs will trigger different expectations. Generally speaking, the more complicate of the needs ,the higher the level of patient expectations.

2.4. Past experience

Patients past experience include the medical service they received from one hospital or from many hospitals, all these experience will accumulate as a cognition. If patients only receive medical service from one hospital, then the greatest service they receive from this hospital will become the standard of desired service, while patients receive more and more medical service from different hospitals, patient expectations will change correspondingly. Cathy Johnson, Brian P, Mathe[7] propose that the more experience the customers received, the higher expectations the customers will form.

2.5. Patient service philosophies and self-perceived service role

Patient service philosophies means the patient’s underlying generic attitude about the meaning of service and the proper conduct of service providers[8]. It influences by patient’s past experience and his social level. If the patient is working in the medical service industry, his expectations will higher than others. Self-perceived service role is defined as patients’ perceptions of the degree to which they themselves influence the level of service they receive. The higher the level of a patient’s self-perceived service role, the higher the level of patient expectations.

2.6. Transitory service intensifiers and situational factors

Transitory service intensifiers are those factors which related to patient expectations and usually short-term, individual factors that lead patient to a heightened sensitivity to medical service. For example : a patient suffer from heart disease, his expectations of medical service quality will increase immediately. Situational factors are defined as service-performance contingencies that patients perceive are beyond the control of the service provider. For example: there are many patients in the waiting room at one point, then patients’ expectation of waiting time will lower.

Patient expectations of medical service quality are influenced by the above mentioned factors. Different patients’ expectations are influenced by different factors and also to the different extent. For the same patient, different environments will also generate different expectations. Therefore, it is very critical for hospital managers to explore influencing mechanism of these factors, and then make great effort to enhance hospital’s competitive advantage and win more market share.

3. Features of patient expectations of medical service quality

According to the particularity of medical service industry, patient expectations bear some features which are different from the generic service industry customer expectations.

3.1. Plurality

Plurality means that patient expectations are affected by the elements such as ages, sexes, educations, incomes, types of diseases, and sources of medical expenses, different expectations will also trigger different needs. Researches shown that: aging patients are more likely to feel lonely , so they need much more sympathy and attention from medical staff , their relatives and friends than other types of patients; for the middle-age or teenage patients, they pay much attention to cure illness
so as to go back to work, so they attach more attention to the rigorous and reliability of medical service.

### 3.2. Potentiality

Information exchange are asymmetric between medical staff and patients. Caused by unfamiliar with medical knowledge, it’s very hard for the general patents to express their expectations and needs in a explicit way. What’s more, in the traditional relationship between medical staff and patients in China, medical staff always feel they are the dominant persons, that’s why in most cases, medical staff are the decision makers of therapeutic schemes. Patients are not understand medical information and the medical behaviors, so their expectations of medical service are superficial.

### 3.3. Dynamic

Medical service quality is composed of technical quality and functional quality. Technical quality is the core need when patients come to medical institutions, while functional quality is the feeling when patients receive medical service from medical staff, it’s influenced by staff attitude, staff behavior, staff wearing and the environment of medical institutions. With the transition from “seller market” to “buyer market”, patients are not only be satisfied with illness can be cured, they are also pay attention to the human-care during treatment process.

### 4. Information transmission model of hospital behavior and patient expectations

In order to achieve the goal of managing patient expectations in an effective way, hospital managers have to make clear the information transition process between hospital behavior and patient expectations. This article bases on the Gaps Model of service quality[1] (A. Parasuraman, ,Valarie A. Zerthaml, ,Leonard L.Berry), combines with the features of medical service, builds an information transmission model of hospital behavior and patient expectations. Hospital managers can analyze the gaps between patient expectation and perceived service quality, and then adopt effective measures to reduce disadvantageous factors, finally meet the reasonable patient expectations.

The main reason to do research on patient expectations is to enhance medical service quality and improve patient’s satisfaction. According to PZB’s research on service quality theory, customer assessments of service quality result from a comparison of service expectations with actual performance, when the result is plus, they think the service quality is good, vice versa. Fig.1 explains the process of information transmission between hospital behavior and patient expectations.

![Figure 1. Information transmission model of hospital behavior and patient expectations](image-url)
Gap1: the gap between patient expectations and management perceptions of those expectations. There are two reasons cause for this gap. The first is managers are not so familiar with patients’ needs; the second is past research on medical industry didn’t focus on patients’ perspective.

Gap2: the gap between management perceptions of patient expectations and the hospital’s service quality specifications. This gap is caused by managers base the specifications only on hospital service process and current resources, but neglecting the most important factor—patients’ real needs.

Gap3: the gap between service quality specifications and actual service delivery. This phenomenon is very common when medical staff are lack of responsibility and the necessarily skills.

Gap4: the gap between actual service delivery and external communications about service. This gap is caused by managers sent wrong messages or made unrealistic promises to patients when they published their hospitals.

Gap5: the gap between actual service delivery and perceived service. This gap appears when patients misunderstand the performance of medical service quality. General patients are lack of medical knowledge, so it’s very common for them to rise some unrealistic expectations. When this happens, they will always think the perceived service is not so good.

Gap6: the gap between expected service and perceived service. This gap are the accumulation of the above mentioned 5 gaps, it will determine the service quality evaluation result.

5. Management of patient expectations of medical service quality

5.1. Pay attention to market research and grasp patient expectations

Market research is an important way to acquire patient needs information, it also helps hospital managers to have a correct understanding of patient expectations.

5.1.1. Market research on patient expectations

This market research should target to the patients in different ages, sexes, educations, incomes, types of diseases, and sources of medical expenses. Through this research, hospital managers can acquire accurate information about patient expectations, and then figure out the implicit needs and explicit needs of the patients, finally put forward some pertinence methods to perfect content of medical service and narrow down the gap between management perceptions of patient expectations and the hospital’s service quality specifications.

5.1.2. Analyze patients’ complaints and make service recovery

According to a survey result made by a America research company called Tapu: if customers bear some grudges in the purchasing process, 60% of them would not make a complaint, but they will tell 9 to 10 persons about this experience. Considering the effect of word-of-mouth in the medical industry, it’s very critical to know and handle patients’ grumbles in the first time. Firstly, managers should encourage patients to make complaints; secondly, managers should take a serious attitude towards these complaints, analyze the underlying reasons, make great efforts to handle the complaints down, provide suitable service recovery so as to minimize negative influence and re-establish patient’s faith in their hospitals.

5.2. Enhance doctor-patient communication and form reasonable expectations

Patient expectations are influenced by many factors. Enhancing doctor-patient communication and helping patients to form reasonable expectations are vital to improve medical service quality and patients’ satisfaction.

5.2.1. Make reasonable promises

On hospital managers side, when doing marketing communication, they should neither public their medical technology in an exaggerate way nor promise medical expenses are extremely low, all of these will trigger some unrealistic expectations; on medical staff side, they should pay great attention to the psychological comforting process, be sure not to make the unpractical promises, these will also lead to unrealistic expectations. When the real performance can’t meet patient expectations, patients may feel they are being cheated and result in dissatisfaction, which will definitely damage hospital image.

5.2.2. Improve patients’ cognition

Due to the different educational level and different professional background, most patients are not so familiar with the current health care system and the medical skills, all of these result in patient expectations are much higher than the real medical capacity. Faced with these situation, on the one hand, medical personnel should help patients to recognize current economic development level and medical capacity in China, assist them to develop reasonable medical expense behaviors and form realistic expectations based on their own economic situations and real needs, and then try to minimize the gap between expected service and perceived service; on the other hand, hospital managers should make the medical staff keep to professional ethics, encourage them to hold the principle of respect patients and pay great attention to communication, finally establishing a harmony doctor-patient relationship, these methods are also very important to overcome patients’ cognitive deficit and enhance perceived medical quality.
5.2.3. Implement informed consent

As a knowledge-intensive industry, patients lack the knowledge of medical, so medical staff should initia-
tively change their dominant position in the traditional
medical service. Doctors should explain all kinds of
treatment methods and let patients choose which method
they would like to use. Only in this way ,patient can par-
ticipate in the whole treatment process ,which will also
help patient to form reasonable expectations. Besides, in
the process of implementing informed consent, faith will
be established between patients and medical staff, this is
a very useful way to reduce medical disputes, attract pa-
tients to visit their hospitals again and encourage positive
word-of-mouth among patients.

5.3. Enhance service quality and meet patient
expectations

After having a correct understanding of expectation
and helping patients to form reasonable expectations,
hospitals should try to enhance their own medical service
quality in order to meet patients’ reasonable needs.

5.3.1. Enhance service level

The transfer of medical service is depend on the
front-line staff, so it’s vital to improve their medial skills
and ameliorate their service attitude toward customers so
as to meet patients’ needs and heighten satisfaction rate.
As a hospital manager, he have to strengthen the com-
unication with front-line staff, help them to know pa-
tients’ real needs and expectations, at the same time, he
should also pay attention to intensify training on work
skills and medical ethics, narrow down the gap between
service quality specifications and actual service delivery.

5.3.2. Provide multi-level service

With the development of economy and the im-
provement of living standard, people are demanding
even higher level of medical service. Bio-psycho-social
medical model has replaced biomedical model gradually,
means that medical staff should not only cure disease,
but also provide other supplement service to meet pa-
tients’ multi-level demands. Facing with different needs
from different patients, hospitals should base on their
financial resources and material resources, combine with
the development characteristics of subjects, provide
multi-level and individualism service, they should set
“Service for all, meet special demands” as their devel-

opment strategy so as to make sure hospital can survive
in this competitive age.

5.3.3. Provide additional service

According to the previous researches, there is a kind
of expectation called super value expectation, this ex-
pectation means that customers want to receive extra
benefits from the service. If this need can be met, even if
only a little, customers will feel very glad and their sat-
fisfaction rate will rise too. For medical industry, this
theory is also suitable, hospitals can take the measures
such as visit patients regularly, sent out vouchers to meet
patients super value expectation. In this way, patients
may feel that they are really being cared, and finally be-
come loyalty customers to the hospital.

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