

INTERNATIONAL PATIENTS' SATISFACTION TOWARDS NURSES SERVICE QUALITY
AT SAMITVEJ SRINAKARIN HOSPITAL

MASTER'S PROJECT
BY
PORAMAPHORN CHUNLAKA

Presented in Partial Fulfillment of the Requirements for the
Master of Arts Degree in Business English for International Communication
at Srinakharinwirot University

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AN ABSTRACT
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With an intensive competition of private hospitals in Thailand, an evaluation of international patients' satisfaction towards nurses' service quality at Samitivej Srinakarin Hospital (SNH) was essential as nurses play an important role in gaining patients' recovery. The purposes of this study were to explore the level of international patients' satisfaction towards nurses' service quality at SNH and to investigate the lowest satisfaction on SERVQUAL dimension. The SERVQUAL dimension consists of tangibles, reliability, responsiveness, assurance and empathy (Parasuraman, 1988). The SERVQUAL dimension was applied in designing the research questionnaire. The data were derived from 50 international patients who received the medical treatments and services as inpatients at the international ward. The results showed that international patients' satisfaction in the five dimensions were at high level. The highest level of international patients' satisfaction was the "tangibles", followed by "responsiveness", "reliability" and "assurance". The lowest patients' satisfaction level was the "empathy" dimension.

ความพึงพอใจของผู้ป่วยชาวต่างชาติต่อคุณภาพการบริการของพยาบาล
โรงพยาบาลสมิติเวชศรีนครินทร์

บทคัดย่อ
ของ
ปรมาภรณ์ จุลกะ

เสนอต่อบัณฑิตวิทยาลัย มหาวิทยาลัยศรีนครินทรวิโรฒ เพื่อเป็นส่วนหนึ่งของการศึกษา
ตามหลักสูตรปริญญาศิลปศาสตรมหาบัณฑิต สาขาวิชาภาษาอังกฤษธุรกิจเพื่อการสื่อสารนานาชาติ
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โรงพยาบาลเอกชนในประเทศไทยมีอัตราการแข่งขันกันสูง โรงพยาบาลสมิติเวชศรี
นครินทร์จึงมีความจำเป็นที่จะต้องประเมินความพึงพอใจของผู้ป่วยชาวต่างชาติต่อคุณภาพการ
ให้บริการของนางพยาบาลซึ่งมีบทบาทสำคัญในการติดต่อประสานงานเพื่อให้ผู้ป่วยหายจากการ
เจ็บป่วย การศึกษาครั้งนี้มีวัตถุประสงค์เพื่อประเมินความพึงพอใจของผู้ป่วยที่มีต่อคุณภาพการ
บริการของนางพยาบาลในโรงพยาบาลสมิติเวชศรีนครินทร์ และประเมินความพึงพอใจในระดับน้อย
ที่สุดของการบริการทั้ง 5 มิติของ SERVQUAL ซึ่งประกอบด้วย การบริการที่เป็นรูปธรรม ความ
เชื่อถือได้ การตอบสนอง ความเชื่อมั่นและการเข้าถึงจิตใจ การศึกษาครั้งนี้ใช้แบบสอบถามจำนวน
50 ชุดในการเก็บข้อมูลจากผู้ป่วยชาวต่างชาติที่พักรักษาตัวในหอผู้ป่วยชาวต่างชาติที่โรงพยาบาล
สมิติเวชศรีนครินทร์โดยการประยุกต์ใช้เครื่องมือ SERVQUAL ผลจากการศึกษาพบว่าผู้ป่วยมี
ความพึงพอใจต่อการบริการทั้ง 5 มิติในระดับสูง ทั้งนี้ยังพบว่ามิติด้านบริการที่เป็นรูปธรรมได้รับ
ความพึงพอใจสูงสุด รองลงมา คือการตอบสนอง ความเชื่อถือได้ และความเชื่อมั่น ตามลำดับและ
การเข้าถึงจิตใจได้รับความพึงพอใจจากผู้ป่วยน้อยที่สุด

The Master's Project Advisor, Chair of Business English for International Communication Program and Oral Defense Committee have approved this master's project, *International Patients' Satisfaction towards Nurses Service Quality at Samitivej Srinakarin Hospital*, by Ms. Poramaphorn Chunlaka as partial fulfillment of the requirements for the Master of Arts degree in Business English for International Communication of Srinakharinwirot University.

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CHAPTER 1

INTRODUCTION

Background of the Study

Private hospitals continue to expand in Thailand due to the increasing number of international patients seeking medical treatment, physical check-ups, dental treatment or surgical procedures. Patients also require treatment and care from hospital staff, especially when they attend private hospitals (Association of Thai Private Hospitals, 2006). The quality of service has become a major source of competitive strength in building patient satisfaction and loyalty (Taylor, 1994). As a consequence, hospitals need to understand the strengths and weaknesses of the services they provide to best serve the patients' needs.

International patients generate high medical expenses during hospitalization. Their purchasing power is considerably higher than domestic patients. In 2005, 1.28 million expatriates visited Thai hospitals, generating around 33 billion baht in revenue. This means that each international patient paid an average of 25,800 baht for services provided (The Kasikorn Research Centre, 2008). This substantial revenue encourages private hospitals in Thailand to be more competitive in terms of medical treatment and services provided to their patients. As a result, all private hospitals must provide the best services to patients to satisfy or even exceed their expectations.

Patient satisfaction is an essential indicator for the quality of hospital staff service. Linder-Pelz (1982) defined patient satisfaction as an expression of an attitude, an affective response and as the individual's positive evaluation of distinct dimensions of healthcare.

The significance of patient satisfaction in the hospital business is that a satisfied patient will be a positive asset for the hospital that may encourage return visits or positive word of mouth, both of which lead to increased profits.

On the contrary, a dissatisfied patient will tell people about their dissatisfaction, which could become a real burden to the hospital in terms of losing the patients' loyalty. Patient feedback is important because dissatisfaction provides opportunities for improvement and gives the staff a chance to respond immediately. Moreover, hospital staff is then able to identify the root cause of a problem and would find an appropriate solution to prevent the same incident from reoccurring.

Ford, Bach and Fottler (1997) noted that patient satisfaction has emerged as an important factor in measuring the quality of care provided by healthcare organizations. It is not only important for gaining insight into customers' perception of healthcare services, but it is also a key outcome of care (Donabedian, 1998). Low patient satisfaction may result in poor compliance, potential waste of resources and suboptimal clinical outcomes. As pointed out by McKinley et al. (1997), satisfaction of the patient's legitimate demands should be the expected outcome of all medical care. Nurses play an important role in satisfying patients' expectations as they are the primary point of contact between patients and the world of healthcare.

A nurse's role is to restore health and alleviate patient suffering. They are the main personnel who directly provided nursing services to patients. Their main responsibilities are to provide primary treatment care and coordinating with other healthcare professionals in caring for patients. In international healthcare as in an international ward, nurses are required to communicate in English. This skill is expected to satisfy international patients to

serve their basic needs. According to Margolies (1998), a high level of patient satisfaction leads to increased revenue. Hence, the measurement of patient satisfaction with nursing is important.

In the past decade, SERVQUAL has proven to be the most popular instrument for measuring service quality. It aims to measure perceptions of a service across five service quality dimensions composed of tangibles, reliability, responsiveness, assurance and empathy (Parasuraman, 1985). The present study uses an adapted version of the SERVQUAL instrument to evaluate international patients' satisfaction nursing services in the international ward of Samitivej Srinakarin hospital.

Samitivej Srinakarin Hospital (SNH) is one of the leading private hospitals in Thailand that offers high quality medical services to both Thai and international patients. The quality of treatment care and services, medical equipment and the quality of the service are key factors that attract patients to the hospital. An important source of hospital revenue comes from international patients because the hospital is located near Suvarnabhumi International Airport. SNH is the only hospital providing clinic facilities at Suvarnabhumi Airport. Whenever patients, particularly travelers, require medical care, they cannot acquire at a clinic, they will be referred to SNH for further treatment.

Many previous researchers have studied patient satisfaction towards nursing services in healthcare using SERVQUAL dimensions. This study focused on the level of international patients' satisfaction towards the quality of the nursing service provided by nurses on an international ward. The five dimensions of SERVQUAL (tangibles, responsiveness, reliability, assurance and empathy) will be used to evaluate the quality of the nursing service. The results of this assessment of service quality will be beneficial to

Samitivej Srinakarin Hospital to identify the level of satisfaction focusing on international patients.

Significance of the Study

It is important to determine the satisfaction of international patient because service quality is an indicator of the hospital's success on the international ward. The results of this study will be beneficial to the director of Samitivej Srinakarin Hospital and department head of the international ward in order to improve performance and service quality.

This study of patient satisfaction is significant because it will serve as a guideline for the hospital director to establish service quality policies and a development plan relevant to the workflow of nurses in the international ward. Additionally, the patients' satisfaction level will be used as an indication for the department head of the international ward to improve daily operations concerning the quality of nursing services by maintaining strengths and supervising weaknesses more carefully.

Objectives of the Study

This study covers two objectives:

1. To explore the level of international patient satisfaction concerning services provided by nurses in the international ward at SNH in five dimensions (tangibles, reliability, responsiveness, assurance and empathy).
2. To identify the lowest dimension of service on SERVQUAL as indicated by international patients.

Research Questions

This study aims to answer the following research questions:

1. What is the level of international patients' satisfaction towards services provided by SNH nurses in the international ward?
2. What is the lowest dimension of service on SERVQUAL as identified by international patients?

Scope of the Study

The respondents of this study comprised of 50 international patients who received medical treatment and service as inpatients under the care of nurses on the international ward. The questionnaire was distributed to international patients admitted to SNH between October 1 and November 1, 2009.

Definition of Terms

International Patients	Patients from foreign countries who are not Thai and require medical treatment as inpatients for at least one night at Samitivej Srinakarin Hospital.
Service Quality	Quality is the totality of features and characteristics of a service that bears on its ability to satisfy needs.
Customer Satisfaction	A customers' perception of an organization's services in comparison with previous experiences.

Customer Loyalty

The condition where customers have confidence in an organization and implicitly trust its services. Customers return for services even if at some time they are dissatisfied with services rendered.

CHAPTER 2

LITERATURE REVIEW

This chapter presents a review of literature consisting of an overview of private hospitals and international patients in Thailand, the role of nurses in healthcare services, the importance of customer satisfaction, customer loyalty and previous research.

Overview of Private Hospitals and International Patients in Thailand

This section provides an overview of private hospitals and international patients in Thailand.

Private Hospitals in Thailand

Since 2003, Thailand has positioned itself well to become a medical hub of Asia (The Thailand Board of Investment, 2007). More than 400 hospitals offer the most advanced treatments by internationally trained medical staff. These leading private hospitals have been actively encouraging medical tourists to visit Thailand. This great vision, together with support by the Thai government, has increased the number of international patients in the leading private hospitals in Bangkok.

Samitivej Hospital is one of the top five private hospitals in Thailand. It provides international standard medical treatment supported by a team of highly qualified specialists and experienced caregivers. Approximately 40% of Samitivej hospital's customers are international patients. Samitivej Srinakarin Hospital (SNH) is located nearby Suvarnabhumi

Airport and the only hospital accepting patients transferred from the Airport Authority of Thailand.

To be more competitive, private hospitals are repositioning themselves as specialist medical facilities. Private hospitals in Thailand hold several competitive advantages as shown in Table 1.

Table 1 Competitive Advantage – Thailand and Asian Competitors

Competitive Advantage	Thailand	Singapore	India	Malaysia	Hong Kong
Service and hospitality	XXXXX				
Hi-Tech hardware	X	XXX	XX	X	XX
International accredited hospitals	X	X			
Reasonable cost	XXXX		XXXX	XXX	

Source: Association of Thai Private Hospitals, 2006

International patients generate a considerable amount of income for private hospitals in Thailand. The primary factor that attracts international patients to private hospitals in Thailand is the high service quality and hospitality. Costs are also much lower than in other countries providing similar quality and technology. Furthermore, private hospitals in Thailand have achieved the standards of Hospital Accreditation (HACC) of Thailand such as ISO 9002, ISO 900:2000, ISO14001, ISO 18000 and Joint Commission International Accreditation. These are the main reasons behind the popularity of private hospitals in Thailand.

International Patients in Thailand

The number of international patients in Thailand has increased dramatically in the last decade. The number of international patients in 2001 was 550,161; in 2002, it was 630,000 and in 2003; it rose to 973,532. The percentage of international patients increased from 14.5% in 2002 and an additional 54.5% in 2003. The national target is to raise the number of international patients seeking medical treatment in Thai hospitals to 2,000,000 by 2010 (The Export Promotion Department, 2006).

Medical tourism continues to be a growth industry in Thailand. The annual growth rate has been 14%, with increases in major surgical procedures, as well as those seeking standard medical care (TAT, 2008). The expensive cost of healthcare in many Western countries makes Thailand's medical service industry ever more attractive. Comparative costs of medical procedures in the United States, United Kingdom, Singapore and Thailand are shown in Table 2.

Table 2 Comparative Medical Costs

Procedure	USA	UK	Singapore	Thailand
Heart bypass surgery	122,424	35,000	20,000	12,000
Valve replacement	159,326	54,000	13,000	10,500
Hip replacement	43,780	19,000	12,000	12,000
Spine surgery	62,778	22,000	9,000	7,000

Source: The Manager, 2006 (all figures are in US dollars)

Thailand maintains an advantage by offering international standard medical services at a low cost. This is the main reason for many international patients to choose Thailand

when seeking medical attention. Moreover, a long waiting period for medical services in Europe and the USA further attracts international patients to seek medical procedures at private hospitals in Thailand.

The Role of Nurses in Healthcare Service

Nurses provide primary medical services to patients, playing an influential role in their well-being and satisfaction. This section provides background literature concerning the role of nurses, service quality and the SERVQUAL instruments.

Nurses' Roles in Hospital

In a hospital, the role of nurses is to provide primary treatment care and coordinate with other members of the healthcare team to take care of patients. The World Health Organization (WHO) (1997) divided the roles of nurses into six categories as follows.

1. Care for patients. Nurses' take care of patients 24 hours a day. They help them rest, fall asleep and assure they are comfortable. Nurses also understand medical conditions and make decisions such as when a patient has a fever, they provide a bed bath to reduce the temperature. They also provide instructions before giving intravenous (IV) fluid.
2. Work with doctors to cure patients. Nurses play an important role in evaluating patients, detecting problems and monitoring patients' progress to make sure there are no complications. Nurses often discover problems before anyone else and report them to a doctor whenever a patient's condition significantly changes.

3. Coordinate patient care. Nurses collaborate with other members of the health care team. In coordinating work with others, they always keep the patient at the centre of concern.
4. Protect the patient. One of the major responsibilities of nurses is to protect patients by ensuring that the environment is safe and healthy. Nurses take every precaution to prevent the spread of infection from one patient to another.
5. Teach patients and families. Teaching is a major role of nurses in restoring health, promoting health and preventing illness. Nurses give basic instructions to patients about self treatment during hospitalization. Before patients leave the hospital, the nurse teaches the patient and family about home care by providing a clear explanation of medication upon discharge.
6. Advocate for patients. Nurses are present with patients during the most critical time of their lives. This advocacy represents an essential element of the care, closeness and trust that develops between nurses and patients.

In summary, nurses play an important role in the hospital as they are the primary point of contact between patients and the world of health care. They alleviate suffering, prevent further illness, provide safety and promote health (De Young, 1972), showing their fundamental role that nurses perform in the overall recovery of any patient.

Service Quality

Service quality refers to an overall judgment of a particular service. It is based on the difference between expected quality and perceived quality. When quality is higher than

expected, is can be termed superior service. When the expected quality of a service equals a perceived service level, it is referred to as general service quality. When the perceived service level is higher than the expected, it is referred to as better service quality. When perceived service level is lower than expected, it is referred to as worse service quality (Parasuraman et al., 1997). Service quality is a critical component of customers' perception of value that determines customers' satisfaction. Customers perceive greater value for their money when they experience a high level of quality (Oh, 2000).

High quality service is considered an essential determinant of long-term profitability for both service and manufacturing organizations (Margolies, 1988). Superior "service quality" is a key to improve profitability. Within the hospital industry, a competitive advantage is best attained through service quality and customer satisfaction (Taylor, 1994).

As a result, service quality can be used as a competitive strategy. To achieve service excellence, hospitals must strive for "zero defects," retaining every customer that they can profitably serve. The hospital can use service quality to create a competitive advantage by emphasizing responsiveness and consistency of service delivery.

The SERVQUAL Instrument

Parasuraman et al., (1988) evaluated goods and services based on four characteristics: intangibility, perishability, heterogeneity and inseparability. Service marketing and product marketing present distinct situations because service quality is more subjective than product quality and is also more difficult to evaluate.

The SERVQUAL method is a technique that can be used to perform a gap analysis of an organization's service quality performance against customer service quality needs. It is an empirically derived method that may be used by a service organization to improve quality. It is widely used within service industries to understand the perception of target customers regarding their service needs. It was originally measured on ten dimensions and by the early 1990s, the model was refined to five dimensions as shown in Figure 1 (Zeithaml et al., 1990).

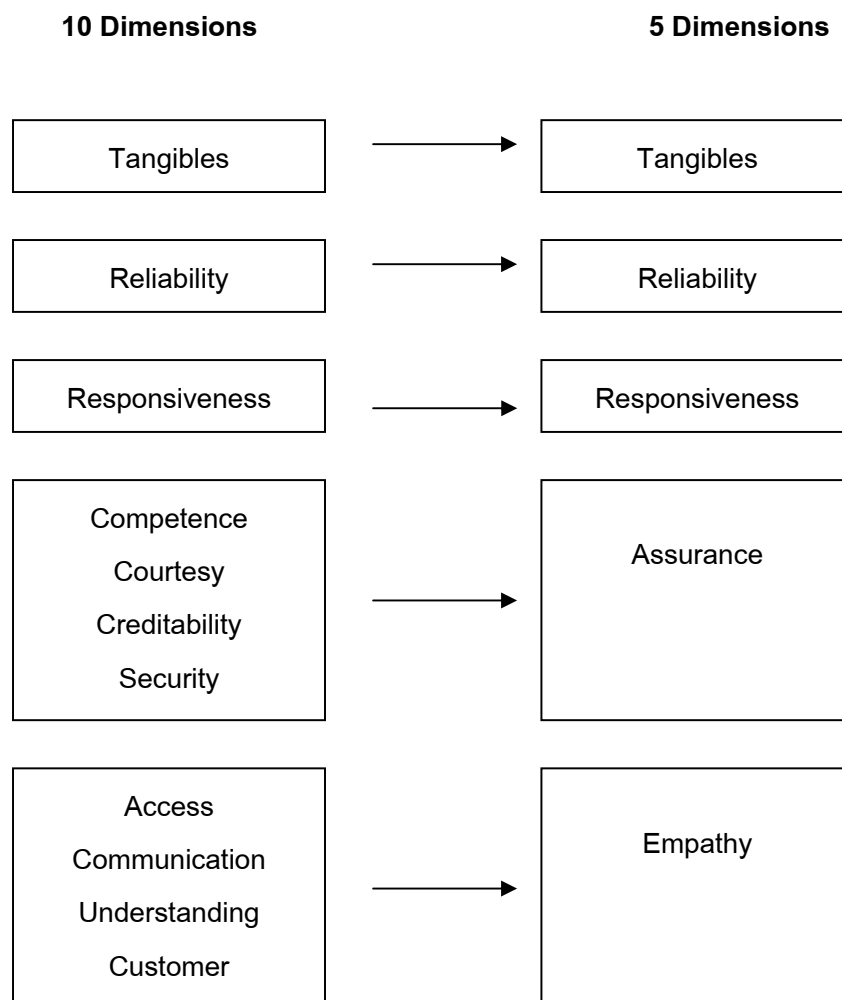


Figure 1 Dimensions in the SERVQUAL instrument

SERVQUAL is a multi-item scale developed to assess customer perceptions of service quality in service and retail businesses (Parasuraman et al., 1998). The scale distills the notion of service quality into five constructs as shown Table 3:

Table 3 The SERVQUAL Instrument

The SERVQUAL Instrument	
Dimensions	Meaning
Tangibles	Physical facilities, equipment and appearance of personnel
Reliability	Ability to perform the promised service dependably and accurately
Responsiveness	Willingness to help customers and provide prompt service
Assurance	Knowledge and courtesy of employees and their ability to inspire trust and confidence through competence, courtesy, creditability and security
Empathy	Caring and individualized attention that the firm provides to its customers, namely, access, communication and understanding the customer

SERVQUAL presents service quality as a discrepancy between a customer's expectations of a service and their perception of service received, requiring respondents to answer questions concerning both expectations and perceptions. The measurement of perceptions as opposed to actual service received makes SERVQUAL a measure of attitudes that is related to, but not the same as, satisfaction (Parasuraman et al., 1988). Parasuraman et al. (1991) revised the original SERVQUAL measure to remedy problems

with high means and standard deviations found on some questions and to obtain a direct measurement of the importance of each construct. The present study applied SERVQUAL to measure international patients' satisfaction in these five dimensions.

A hospital's tangible attributes must be efficient and well-equipped to handle international patients who generally demand high quality professional services. This includes medical equipment being updated and renewed frequently to maintain high technological standards, comfortable rooms and facilities plus neat appearance of nurses in international wards. A hospital's location is also considered a tangible attribute.

Reliability refers to the service provided by nurses on the international ward within the promised timeframe. This reflects the ability to perform a service dependably and accurately. It is one of the most important service components for customers (Berry & Parasuraman, 1991). Responsiveness represents the willingness of nurses to provide services promptly and in a timely manner.

Assurance reflects the knowledge and courtesy of nurses and their ability to inspire trust and confidence using English for communication. It includes an ability to provide clear explanations before care is given plus explanations of medicine to patients before discharge. Empathy involves caring, individualized attention of nurses, where communication in English is also a factor.

In conclusion, SERVQUAL is an instrument for organizations to better understand what customers' value and how well their organizations are meeting the needs and expectations of customers.

The Importance of Customer Satisfaction and Loyalty

Patient satisfaction is a valid indicator of service quality measurement. Patients' opinions are important because dissatisfaction presents opportunities for improvement. To satisfy patients, SNH should focus on creating patient retention and loyalty. This is the first step towards building trust and loyalty.

Customer Satisfaction

Customer satisfaction is when a customer is satisfied with a service or product that meets their needs, wants and expectations. It is considered one of the most important competitive factors, and is the best indicator of a company's profitability (Muffato & Panizzolo, 1995). It also indicates the quality of service at all levels of the company (Sermisri & Chompikul, 2007) and helps an organization achieve its objectives by retaining loyal customers who promote positive word of mouth (Soutar, 2001). Feedback from customers allows a company to measure customer satisfaction.

Customer retention means keeping customers without losing them to competitors. Most companies realize that it is more expensive to find new customers than to keep existing ones, so they invest substantially in looking after and retaining existing accounts. Rust and Zahorik (1993) stated that the financial implications of attracting new customers may be five times as costly as keeping existing customers.

Customer Loyalty

Loyalty comes primarily from a customer's emotional connection and experience with the people in an organization. Secondly, it is influenced by experience with products and processes. Loyalty occurs when an individual has a vested interest in maintaining a

close relationship, usually resulting from a series of positive experiences that have occurred over time. This experience can be either tangible (product quality, ease of use, prompt and effective service) or intangible (respectful communications, trustworthy company image) (Isopahkala, 2006).

Loyal customers are more profitable to an organization because they are more likely to buy additional products. On the other hand, dissatisfied customers are a real cost to a company, because they complain about the company to others. Szwarc (2005) proved that dissatisfied customers are likely to tell more people about their dissatisfaction than satisfied customers who tell people why they are satisfied. Customers who are dissatisfied tell twice as many people as those who are happy with services (Blodgett, Granboise, Kjellerup & Ruchti (1999).

Patient trust and good interpersonal relationships with the primary care physician (PCP) are major predictors of patient satisfaction and loyalty to a doctor (Platonova, Kennedy and Shewchuk (2008). Trust, satisfaction, and loyalty are strong and significant predictors of a patient's intention to stay with a doctor and recommend the PCP to others.

In conclusion, healthcare organizations are operating in an extremely competitive environment. Patient satisfaction has become a key in gaining and maintaining market share. Patient satisfaction with a hospital's services substantially contributes to long term success and competitiveness.

Previous Research

Patient satisfaction with nursing healthcare services evaluated by using SERVQUAL has been widely studied. Chou, Chen, Woodard and Yen (2005) used SERVQUAL to evaluate quality of nursing service in Taiwan. The service dimensions were tangibles, reliability, responsiveness, assurance, and empathy, adopted from the model proposed by Parasuraman, Zeithaml and Berry (1985). The findings indicated that responsiveness was highly significant in predicting overall satisfaction with hospital services. Reliability was significant in predicting overall satisfaction with nursing care and the intent to return. Empathy was a highly significant predictor of a patient's intent to recommend the hospital to others.

Lin, Xirasagar and Laditka (2004) studied patient perceptions of service quality in group clinics versus solo practice clinics. They measured the same five dimensions of service quality plus potential patient loyalty (PPL) on a five point scale. After accounting for random effects of the clinical and geographical location, patients visiting a group practice clinic reported significantly higher service quality in all dimensions. All service quality dimensions except assurance were significantly positively associated with PPL after adjusting for age, gender, education, illness type and random effects.

Wang, Chang, Liu and Chen (2007) conducted research into care quality for long-term care Institutions. Based on the 5 SERVQUAL model constructs, they found that responsiveness and empathy were the most critical factors in nursing care quality.

Uzun (2001) studied patient satisfaction with nursing care at a university hospital in Turkey using the SERVQUAL scale. The scores for five dimensions did not meet the expectations. Negative scores for tangibles, reliability, responsiveness, assurance and empathy indicated areas needing improvement. The results showed the needs for nurses to improve patient satisfaction with nursing care.

Overall, the studies in the literature indicated that the three most important SERVQUAL dimensions concerning nursing services in healthcare were responsiveness, reliability and empathy.

CHAPTER 3

RESEARCH METHODOLOGY

This chapter presents the research methodology of the study, including information concerning the participants, instruments, the procedures of the study and data analysis.

Participants of the Study

The participants in this study were 50 international patients who received inpatient medical treatment on the international ward of Samitivej Srinakarin Hospital. These patients received treatment during an eight-week period between October 1 and November 30, 2009. The participants were selected for inclusion in the study based on four criteria. First, they were admitted to the international ward. Second, they were admitted to the hospital for at least one night. Third, they were in normal condition and able to respond to the questionnaire. Fourth, their condition was not critical and there was no risk of infection.

Instruments of the Study

The questionnaire was presented in English, the medium of communication in the international ward at Samitivej Srinakarin Hospital. It was collected between October 1 and November 30, 2009. It measured patient satisfaction based on the five service dimensions of SERVQUAL, namely, tangibles, reliability, responsiveness, assurance, and empathy. It

consisted of three sections: personal data, satisfaction, and additional recommendations or comments.

Part 1: Personal Data

The first section of the questionnaire included questions regarding personal information including sex, age and country of residence. This data is beneficial to the marketing team to focus on prospective clients when planning marketing strategies.

Part 2: International Patients Satisfaction with Samitivej Srinakarin Hospital services

This section included twenty questions concerning patient satisfaction.

Respondents rated their level of satisfaction with services provide by nurses on international ward at Samitivej Srinakarin Hospital. The questionnaire was designed based on the five SERVQUAL dimensions. The rating scale was: highest (5), high (4), moderate (3), low (2), lowest (1). The criteria and meaning of the rating scale was defined as follow:

Number 5 means the highest level of patient satisfaction.

Number 4 means the high level of patient satisfaction.

Number 3 means average level of patient satisfaction.

Number 2 means low level of patient satisfaction.

Number 1 means the lowest level of patient satisfaction.

The scale measured the level of patient satisfaction for each SERVQUAL dimension. Based on the criteria of Best, (1981), the mean of the standard ranking scale was used to evaluate the level of patient satisfaction towards nursing services. The criteria and meaning of the ranking scale are interpreted as follows:

Rating of 4.50 – 5.00:	Reflects the highest level of patient satisfaction.
Rating of 3.50 – 4.49:	Reflects high level of patient satisfaction.
Rating of 2.50 – 3.49:	Reflects average level of patient satisfaction.
Rating of 1.50 – 2.49:	Reflects low level of patient satisfaction.
Rating of 1.00 – 1.49:	Reflects the lowest level of patient satisfaction.

Part 3: Additional Recommendations and Comments

The third section of the questionnaire was an open question allowing respondents to add their comments or recommendations freely. They could state what needs improvement or express their appreciation to particular nurses who had provided impressive services during their hospitalization.

Procedures of the Study

The procedure of the study consists of a pilot study and data collection.

Pilot Study

The researcher interviewed the head nurse of international ward and interviewed the five respondents who were willing to respond questions relating to nurses service quality at Samitivej Srinakarin Hospital. All information acquired, as well as the experience of the researcher as an international insurance manager, was used as a guideline to design the questionnaire.

Before distributing the questionnaire, it was piloted with five international patients to ensure the language was concise and easy to understand. It was then modified and improved prior to data collection.

Data Collection

Fifty questionnaires were distributed to respondents who were discharged between October 1 and November 30, 2009. The best time to complete the questionnaire was during the discharge process, requiring approximately 15 minutes to complete.

Data Analysis

After reviewing the completed questionnaires, the data was gathered and analyzed parting each section. Frequency and percentage were used to calculate and analyze the personal data in section one. In section two, the mean score was used to analyze the level of patient satisfaction in five dimensions. The results were calculated using the Statistical Package for Social Science (SPSS) for WINDOWS.

In conclusion, this chapter has described the overall methodology of the study. A questionnaire was used to collect data concerning five SERVQUAL dimensions and was analyzed in terms of frequency, percentage and mean. The findings from this reserch follow in chapter 4.

CHAPTER 4

FINDINGS AND DISCUSSION

This chapter presents the findings and a discussion of international patient satisfaction with nursing services at Samitivej Srinakarin Hospital (SNH). The results are divided into two parts: personal data of participants and level of international patient satisfaction with the quality of nursing service at Samitivej Srinakarin Hospital.

Personal Data of Participants

In this section, the personal data of international patients is classified by sex, age and country of residence (see Table 4). Of the 50 participants from the international ward of the hospital, 52% were male and 48% were female. They were classified into 4 age groups. The subject group aged 20-30 years accounted for 24%, 31-40 years old, 36%, 41-50 years old, 11% and 51-60 years old, 18%. The international patients aged 31-40 years old, were found at SNH higher than the other age group. This might be because these age groups travel to Thailand a lot more than the other age group.

The majority of international patients came from five countries. 26% were from Australia, 16% from the United States, 10% from the United Kingdom, 10% from France and 6% from Japan. The remaining 32% of participants came from a wide variety of countries including Finland, Korea, Canada, Norway, Malaysia and Israel.

Table 4 Personal Data of Participants (N = 50)

Items	Frequency	Percentage
Sex		
Male	26	52
Female	24	48
Age		
20-30 years	12	24
31-40 years	18	36
41-50 years	11	22
51-60 years	9	18
Country of Residence		
The United States of America	8	16
Australia	13	26
United Kingdom	5	10
France	5	10
Japan	3	6
Others	16	32

The next section presents the results of international patient satisfaction towards the five dimensions of service quality (SERVQUAL) being studied in this research: tangibles, reliability, responsiveness, assurance and empathy.

Level of International Patient Satisfaction with the Quality of Nursing

Services at Samitivej Srinakarin Hospital

This section presents the levels of satisfaction with nursing services using the five dimensions of SERVQUAL as shown in Figure 2.

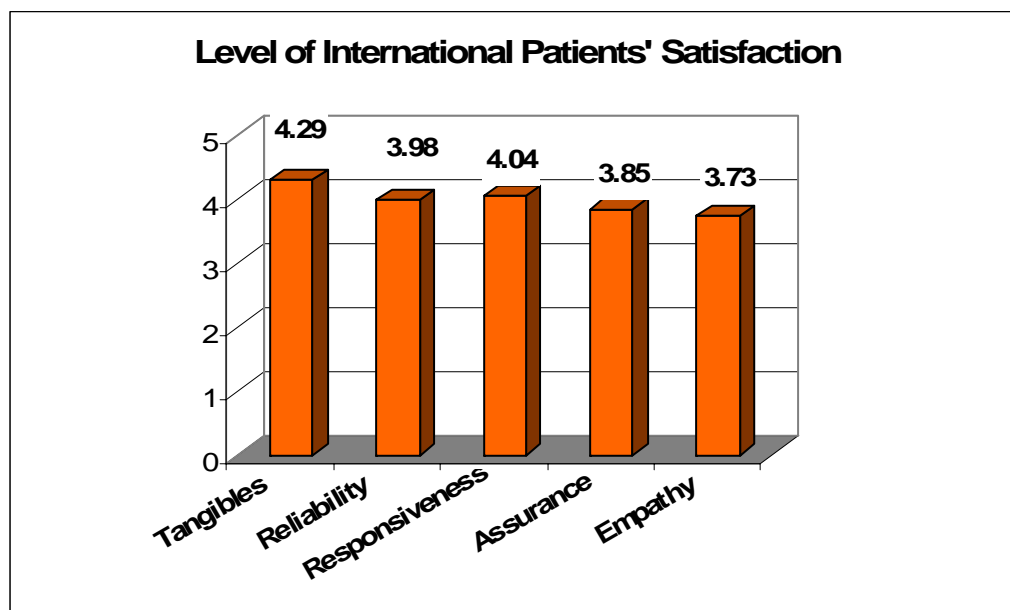


Figure 2 Level of International Patient Satisfaction

Figure 2 shows the level of international patient satisfaction. The mean score of overall satisfaction in all five dimensions was high. The detail in score in each SERVQUAL dimension is discussed below.

Tangibles

This section presents the level of satisfaction with four tangible aspects: room cleanliness, high technology equipment, room facilities and uniform cleanliness (see Table 5).

Table 5 Means of Patient Satisfaction Towards Tangibles

Tangibles	Mean	Level
1. SNH maintains cleanliness of room.	4.34	High
2. SNH has high technology equipment.	4.22	High
3. SNH room facilities are comfortable.	4.26	High
4. SNH nurses wear clean uniforms.	4.32	High
Average Mean Score	4.29	High

The results showed that the overall level of satisfaction in the tangible dimension was high, with a mean score of 4.29. The mean score for room cleanliness was 4.34. The mean score for uniform cleanliness was 4.32. The mean score for room facilities was 4.26. One patient commented that the facilities of the hospital were the same standard as a hotel, saying "Samitivej Srinakarin Hospital is one of the best choices of medical care in Thailand and facilities are comfortable." The mean score for high technology equipment was 4.22. The lowest mean score among these items concerned technology. To enhance the competitive advantage in this area, SNH's medical equipment needs to be up-to-date and renewed frequently to maintain high standards. Patients chose the hospital where they could stay and felt comfortable, confident and recovered well from their sickness. Hence, SNH tangible attributes were found to be efficient and well-equipped to handle international patients who generally demand high quality and professional services.

Reliability

Table 6 presents the level of patient satisfaction with the ability of nurses to solve patients' basic problems, work reliably, provide accurate information and perform services dependably.

Table 6 Means of Patient Satisfaction Towards Reliability

Reliability	Mean	Level
5. Services provided by SNH nurses are within the promised timeframe.	4.02	High
6. Nurses show their interest in solving patients' basic problems.	4.04	High
7. Nurses are reliable and provide accurate information.	3.82	High
8. Nurses perform services right the first time.	4.02	High
Average Mean Score	3.98	High

The results showed that overall satisfaction with reliability was high with a mean score of 3.98. Nurses showing their interest in solving patients' basic problems received the highest mean score at 4.04. This is because nurses were well-trained to take care of patients 24 hours a day, helping them rest, sleep and ensuring they are comfortable. The mean score for providing service within the promised timeframe and for dependably performing service both yielded a mean score of 4.02. The mean score for reliability and accurate information was 3.82, indicating that the ability to perform service accurately still needs improvement. This may be because nurses' may not be able to provide reliable and accurate information to patients. This is supported by one patient, who commented,

“The officer sometimes lacked of communication skills to explain my symptoms.” The ability to communicate in English may be a barrier between nurses and international patients.

Nurses need improvement in English speaking and listening skills to enhance communication with patients, which in turn will inspire patients to return to the hospital if the needs arise.

The present research result is consistent with Chou et al., (2005) who used SERVQUAL to evaluate the quality of nursing service in Taiwan. Their study showed that reliability was significant in predicting overall satisfaction with nursing care and the intent to return. Berry et al. (1991) also advised that reliability was one of the most important service components for customers. To achieve service excellence, SNH must improve their service quality in terms of providing reliable and accurate information plus improving English ability. These actions would increase patient satisfaction, maintain patient loyalty and effectively retain existing patients.

Responsiveness

This section explores patient satisfaction with nurses concerning willingness to answer questions and to assist international patients, visiting at appropriate times and promptly responding to requests (see Table 7).

Table 7 Means of Patient Satisfaction Towards Responsiveness

Responsiveness	Mean	Level
9. Nurses are willing to answer patients' questions.	3.82	High
10. Nurses are willing to help at all times.	4.10	High
11. Nurses visit patients at appropriate times.	4.16	High
12. Nurses respond to patients' requests immediately in the case of inconvenience or pain.	4.06	High
Average Mean Score	4.04	High

Overall satisfaction concerning responsiveness was high, with a mean score of 4.04. Visiting at appropriate times received the highest mean score at 4.16. This is because nurses at SNH had a duty to evaluate and monitor patients' clinical condition as well as detect any problems. Nurses had to visit a patient every four hours to ensure there were no complications. This means that nurses at the international ward performed their duties in accordance with nursing standards.

The mean score for willing to assist was 4.10. The mean score for prompt response to requests was 4.06. These figures show that the nurses responded to patients' requests immediately. As prompt service was an important expectation of patients, SNH nurses were required to analyze situations in the international ward in order to be responsive to patients' requests and help them promptly.

The mean score for willing to answer questions was 3.82. This was the lowest aspect showing that nurses might not cope well with answering patients' questions. English communication may be an obstacle between the international patients and the nurses at the

international ward. Therefore, nurses' ability to communicate in English needs improvement. An English training class should be conducted to develop nurses' ability in both speaking and listening skills.

A prompt service with ability to communicate in English can result in greater patient satisfaction. This research is consistent with the research result obtained by Chou et al. (2005), who showed that responsiveness was highly significant in predicting overall satisfaction with hospital services. SNH should have service quality to create a competitive advantage by emphasizing on responsiveness and consistency of services.

Assurance

In this section, the findings concerning the quality of nursing service in terms of knowledge of treatment, explanation of medical care, explanation of home medication and ability to inspire trust and confidence are shown (see Table 8).

Table 8 Means of Patient Satisfaction Towards Assurance

Assurance	Mean	Level
13. Nurses are knowledgeable about treatment.	4.02	High
14. Nurses provide a clear explanation before giving medical care.	3.70	High
15. Nurses provide a clear explanation of home medications upon discharge.	3.80	High
16. Nurses make patients feel safe and confident when providing service	3.88	High
Average Mean Score	3.85	High

The results showed that satisfaction in the assurance dimension was at high level with a mean score of 3.85. Knowledge of treatment received the highest mean score at 4.02. This shows that the nurses had a high level of knowledge and skills providing service. At SNH, one job specification is that nurses must have a minimum of one to two years work experience. This is important because previous experience affects decision making skills (Kirt, 1981). Nurses use their understanding of medical conditions as well as knowledge of nursing when determining patient care.

The mean score for ability to inspire trust and confidence was 3.88. The mean score for explanation of home medications was 3.80. The mean score for explanation of medical care was 3.70. The result suggested that nurses need an improvement in communication skills to provide clear explanation before providing the medical care. Nurses need to explain their patients to ensure the process of medical care. Knowledge and courtesy plus the ability to inspire trust and confidence can increase patient satisfaction. Hence, it is important to ensure that nurses provide professional care to patients.

The nursing service is the art of helping others and enables people to help themselves. The World Health Organization (1997) has defined one role of nurses as being an advocate for patients. This is one aspect of caring, closeness and trust between nurses and patients.

Empathy

In this section, patient satisfaction with nursing quality concerning ability to communicate in English, tone of voice, facial expression and personal attention to patients are presented (see Table 9).

Table 9 Means of Patient Satisfaction Towards Empathy

Empathy	Mean	Level
17. Nurses are able to communicate with patients in English.	3.46	Average
18. Nurses have a pleasant tone of voice.	3.86	High
19. Nurses show empathetic facial expression.	3.90	High
20. Nurses give patients personal attention.	3.68	High
Average Mean Score	3.73	High

The results showed that overall international patient satisfaction concerning the dimension of empathy was at a high level with a mean score of 3.73. The mean score for facial expressions was 3.90. The mean score for tone of voice was 3.86. The mean score for providing personal attention was 3.68. The mean score for ability to communicate in English was 3.46.

Empathy refers to caring and giving individualized attention to patients including approachability, ease of contact, effective communication, and understanding (Parasuraman et al., 1991). Individual attention can be expressed through effective communication, empathetic facial expressions and a pleasant tone of voice. Of primary concern in the present research is the fact that “nurses are able to communicate in English” received only an average mean score, showing the first topic that failed to achieve a high ranking. Evidence to show the failure was from the international patients who commented that “Nurses require a bit higher skill of English” and “Perfect service but requires more English speaking”. Mutual understanding between nurses and patients was not always

communicated. One cause of this situation is that the majority of nurses graduated with Thai nursing degrees studying in Thai language and had little opportunity to communicate in English. The majority of SNH recruited nurses received TOEIC score between 300-350 points. For nurses who worked at International ward, the TOEIC score between 300-350 points may not sufficient to take care of international patient. To resolve this situation, SNH should require that nurses pass an English TOEIC test with a minimum score of 450 of the application process. This would screen and evaluate the nurses' English communication skills before they are permanently recruited.

In summary, the mean score of international patients' satisfaction in the five dimensions were at high level, tangibles (4.29), responsiveness (4.03), reliability (3.98), assurance (3.85) and empathy (3.73). To gain a competitive advantage and be a leading private hospital in Bangkok, SNH should pay attention to all five dimensions in order to increase the level of international patient satisfaction. This is supported by Muffato and Panizzolo (1995), who explained that customer satisfaction is considered one of the most important competitive factors, and will be the best indicator of a company's profitability. Patient satisfaction has become a key in gaining and maintaining market share, showing a hospital's success and long term competitiveness. As a result, a high level of patient satisfaction will lead to increasing revenue and growth of the hospital.

CHAPTER 5

CONCLUSION

This chapter presents the conclusion of the study and the limitations of the research findings. It also presents recommendation for further studies.

Conclusion

Samitivej Srinakarin Hospital (SNH), one of the leading private hospitals in Thailand and provides tertiary care for patients. SNH has to compete with other private hospitals in terms of the business growth, revenue and service provided by the hospital officer. In the world of health care, nurses play an important role in patients' recovery as they are the primary contact with patients, so the investigation concerning patient satisfaction with the quality of nursing is necessary.

This study aimed to explore the level of international patient satisfaction with the quality of nursing at SNH and investigated the SERVQUAL dimension that received the lowest level of satisfaction. SERVQUAL (Parasuraman, 1988) was used to design the questionnaire using five dimensions of service quality, namely, tangibility, reliability, responsiveness, assurance and empathy. A questionnaire consisted of two parts: level of international patient satisfaction plus further recommendation or comments. The study was conducted with 50 international patients who had received medical treatment and services as inpatients at the international ward at SNH between October and November 2009.

The result showed high levels of satisfaction in all five dimensions. The highest level of satisfaction concerned tangibles, followed by responsiveness, reliability and assurance, respectively. The dimension of empathy yielded the lowest level of satisfaction.

The “tangibles” dimension in this study consists of room cleanliness, high technology equipment, room facility and uniform cleanliness. The average mean score of the international patients’ satisfaction in this dimension was at high level. In addition, the result of this study also presented that the lowest mean score among these items was technology. To enhance the competitive advantage in this area, SNH’s medical equipment needs to be updated and renewed frequently to maintain high standards.

The “reliability” dimension in this study consists of ability of nurses to solve patients’ basic problems, providing service within timeframe, perform services dependably, work reliably and provide accurate information. The average mean score of the international patients’ satisfaction in this dimension was at high level. In addition, the result of this study also presented that the lowest mean score among these items was reliability and accurate information. The result indicated that the ability to perform service accurately still needs improvement. The ability to communicate in English may be a barrier between nurses and international patients. Nurses need improvement in English speaking and listening skills to enhance communication with patients, which in turn will inspire patients to return to the hospital if the needs arise.

The “responsiveness” dimension in this study consists of willingness to answer questions, willingness to assist, visiting at appropriate times and promptly responding to requests. The average mean score of the international patients’ satisfaction were at high level. In addition, the result of this study also presented that the lowest mean score among

these items concerned willingness to answer patient questions. It indicates that nurses may not cope well with answering patients' questions. English communication may be an obstacle between international patients and nurses at the international ward. Nurses' ability to communicate in English needs improvement. An English training course should require developing nurses' ability in both speaking and listening skills.

The "assurance" dimension in this study consists of the quality of nursing service in terms of knowledge of treatment, explanation of medical care, explanation of home medication and ability to inspire trust and confidence. The average mean score of the international patients' satisfaction was at high level. In addition, the result of this study also presented that the lowest mean score among these items was explanation of medical care. This was the lowest aspect showing that nurses need an improvement so that they can clearly explain the medical information when providing the medical care. Knowledge and courtesy plus the ability to inspire trust and confidence can increase patient satisfaction.

The "empathy" in this study consists of ability to communicate in English, tone of voice, facial expression and personal attention to patients. The average mean score of the international patients' satisfaction was at high level. In addition, the result of this study also presented that the lowest mean score among these items concerned ability to communicate in English. Of primary concern in the present research is the fact that "nurses are able to communicate in English" received only an average mean score, the first topic that failed to achieve a high ranking. Mutual understanding between nurses and patients was not always communicated. To resolve this problem, SNH should require that nurses pass an English TOEIC test with a minimum score of 450 as part of the application process. This would

screen and evaluate the English communication skills of nurses before they are permanently recruited as nurses at Samitivej Srinakarin Hospital.

In summary, to gain a competitive advantage and be a leading private hospital in Bangkok, SNH should pay attention to all five dimensions in order to increase the level of international patients' satisfaction. Patient satisfaction has become a key in gaining and maintaining market share, showing a hospital's success and long term competitiveness. As a result, a high level of patient satisfaction will increase revenue and growth of the hospital.

Implications of the Study

In this study, the result showed both strengths and weaknesses of Samitivej Srinakarin hospital (SNH). The highest level of international patients' satisfaction was "tangibility" dimension. SNH management team should maintain the service quality in this dimension to create the comfortable atmosphere for patients' recovery.

The lowest level of international patients' satisfaction was "empathy" dimension. SNH should improve the service quality in this dimension especially nurses' ability to communicate in English. An English communication could be a barrier between nurses and international patients. Hence, Continuing Education Department of SNH needs to provide training class to improve nurses' ability in English communication. Additionally, to encourage SNH nurses to communicate in English, an incentive reward (Baht 3,500 per month) is recommended for nurses who receive TOEIC score higher than 800 points.

Limitations of the Study

This study has some limitations as follows:

1. The number of the participants was limited. Only 50 international patients on the international ward at SNH were included in the study. Thus, the result of this study may not represent overall patient satisfaction with nursing services on the ward. If more participants were drawn from the children's ward and the Thai patient ward, more realistic results would be obtained. Overall satisfaction will benefit the hospital in terms of evaluating nurses' service quality, which in turn will increase revenue and hospital business growth.
2. Based on the personal data, foreigners other than English native speakers such as French patients, may not fully understand the English questionnaire. The French are the top target group generating a large amount of revenue of SNH, a questionnaire written in French may help to produce more valid responses and eliminate any misinterpretations.

Recommendations for Further Studies

Based on the findings, the following areas for further research are suggested:

1. A study of patient satisfaction with services provided by nurses in the children's ward and Thai patients' ward should be conducted as they are also an important source of hospital's revenue. The service evaluation completed by Thai patients is recommended in order to gain in-depth information for service improvement. Without evaluating service quality, the hospital may not be able to satisfy patients because they do not know what the patients think about their services.

2. Further studies should include out-patient satisfaction with the quality of nursing services at Samitivej Srinakarin Hospital. Out- patients are also an important source of hospital revenue. Understanding out-patient satisfaction will benefit hospital management for improving the level of patient satisfaction.
3. A study of improving nurses' English communication ability would also be of value. The findings in this study revealed that the satisfaction of nurses' English communication ability scored low. Further research should explore the correlation between improving the English ability of nurses, experience working on the international ward, and patients' satisfaction.

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APPENDIX

Questionnaire

Patient Satisfaction towards Service Provided by Nurses at International

Ward at Samitivej Srinakarin Hospital (SNH)

This questionnaire is designed for a graduate master's project in the Business English for International Communication Program at Srinakarinwirot University. Your cooperation in providing useful information is greatly appreciated. The information you provide will be kept and treated strictly confidential.

Part I: Personal Data

1. Sex 1) Male 2) Female
2. Age 1) 20-30 years 2) 31-40 years
 3) 41-50 years 4) 51-60 years
3. Country of residence
- 1) USA 2) Australia
- 3) UK 4) France
- 5) Japan 6) Other, (please specify).....

Part II: Patient Satisfaction towards Service Provided by Nurses at International Ward at Samitivej Srinakarin Hospital (SNH).

Direction: Please put (X) in a box which best describes your level of satisfaction.

5 = Highest, 4 = High, 3 = Moderate, 2 = Low, 1 = Lowest

Dimensions	Level of Satisfaction				
Tangibility	5	4	3	2	1
1. SNH provides cleanliness of room.					
2. SNH has high technology equipment (e.g. blood pressure measuring machine and thermometer).					
3. SNH room facilities are comfortable (bed, sofa bed and toilet).					
4. SNH nurses wear a clean uniform.					
Reliability	5	4	3	2	1
5. Services provided by SNH nurses are within promised timeframe (For example, nurses provide pain medication after patients request within 15 minutes).					
6. Nurses show their interest in solving patients' basic problems (For example, when a patient has a fever, nurses provide bed bath to reduce temperature).					
7. Nurses are reliable and provide accurate information (For example, nurses give basic instruction to patients about self care during hospitalization).					
8. Nurses perform a service right at the first time (For example, nurses identify a patient's name correctly before giving medications).					
Responsiveness	5	4	3	2	1
9. Nurses are willing to answer a patient's questions.					
10. Nurses are willing to help at all times.					
11. Nurses visit patients at appropriate time (For example, nurses come to measure a patient's vital signs at every 4 hours).					
12. Nurses respond to a patient's request immediately in the case of inconvenience or pain (For example, nurses are present at a patient's room after he/she rings an electric bell).					

VITAE

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