

Factors Attracting Arab Patients to Travel for Medical Services in Thailand

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Abstract

The purposes of this research were to study factors attracting Arab patients to medical services and to provide advice on medical service development. The sample in this study was 20 Arab patients who received medical services at an International Hospital in Bangkok as a case study. In-depth interviews were conducted as a part of the qualitative analysis of the study. It was found that when Arab patients sought cures for illnesses, they asked their friends or family members about medical treatment information, and further researched more information on the Internet. The factors attracting Arab patients to the medical services include - trust in the hospital's quality of care services, high quality of care once admitted, ensuring the patient's service with the medical skills of the doctors, nurses, as well as service staff, providing services with compassionate environment for the Arab patients, quick responses from the service providers, as well as ease of access to services, physical facility of the services and service support at reasonable prices. Some guidelines on the development of medical services based on the results are upgrading medical services into specializations, such as comprehensive cancer treatment centers to establish creditability among the Arabs. Other guidelines include applying modern medical technologies for patient treatments, e.g. endoscopic surgery, laser surgery, stem cell treatments, developing quality services through JCI standards, medical professional development, treating patients with kindness and compassion, physical evidence of the service by offering first-class facilities, high quality medical equipment, fast response, and easy access to services. Also, it is important to provide other support services to meet the needs of the Arabs: applying a lower cost of medical treatment strategies than competitors; promoting marketing activities to gain awareness and recognition among the Arabs; providing membership privileges, use of ads, billboards and banners; utilizing online media services such as Facebook, WhatsApp; delivering exhibition booths in the Arabian countries.

Keywords: Medical services; Arab patients; Hospital; Service quality

Introduction

According to the government policy in Year 2013 on the development of the Medical Service Hub for the Thai medical community to be a center for health development, the government wanted to see the development of the nation's capacity in health through basic fulfillment by raising the level of various health care standards and supporting the medical tourism policy to be the wellness hub and a medical service hub (Department of Health Service Support, 2021).

Private hospitals in Thailand have a competitive advantage in quality of service and lower healthcare rates than those of North America (US) and Singapore. Thailand is now Southeast Asia leader in the number of hospitals with JCI accreditation. There are 66 Thai hospitals with international accreditation, especially the “Joint Commission international accreditation” standard. Thailand is already a popular destination for people seeking inexpensive, high-quality medical treatment and care from outside the country. The standard of its doctors and hospitals is a major concern for prospective patients considering medical care in a foreign country (Royal Thai Embassy, Washington DC, 2019).

In Year 2019, the US magazine CEOWORLD ranked Thailand the sixth among the best healthcare systems in the world. Thailand is becoming more well-known around the world for the quality of its healthcare services, and Thailand earned a score of 67.99 out of a possible 100. From 100 marks, Thailand gained a 92.58 for infrastructure in healthcare service, 17.37 for competency of medical staff, 96.22 for value of money (cost), and 67.51 for medicine availability (Bangkok Post, 2019).

However, Thailand's private hospitals will still face fierce competition. A case study hospital is one of a private hospital in Thailand. This hospital has 10 branches located in Bangkok and nearby provinces. The hospital has been providing modern medical equipment and a team of specialists in various fields. It began its services for more than 30 years and started serving foreign patients in 2015, with the continuously increasing number of foreign customers admitted to the hospital, and the main customer groups are from the Middle East, Africa, and Asian countries. The majority of international patients are from Middle East countries. Arab patients are very important because they have high paying power.

Previously, the method of clinical quality evaluation was performed without taking into account the experiences and input of patients; nowadays, service quality pays an important role in customers' perspective. Patients' suggestions and thoughts, as well as clients' voices, shape quality management and create opportunities for organizational

learning. Therefore, researchers realized the importance of customers from Middle East countries. The results of this study can provide the guidelines for medical services development for serving foreign customers in order to make them more satisfied with hospital's service quality and encourage them to revisit for using medical service in Thailand.

Purpose of the Research

1. To study the factors affecting the admission to medical services for customers from Middle East countries.
2. To provide guideline for developing medical service for serving customers from Middle East countries.

Research Framework

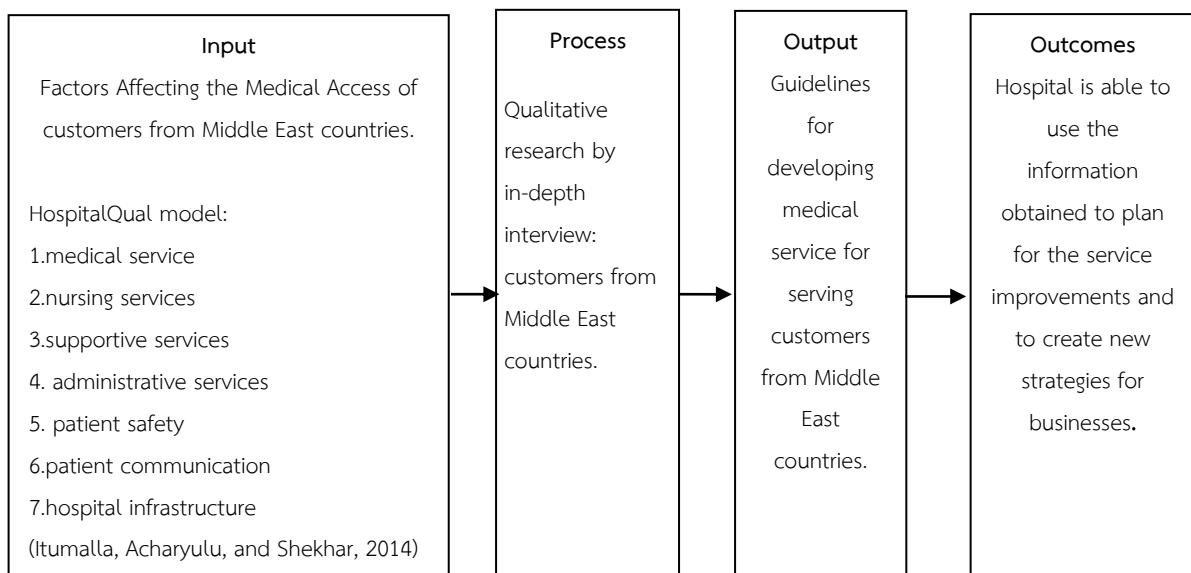


Figure 1: Research framework

Literature Review

1. Patient's Satisfaction

One of the foremost compelling ways to assess and progress the standard of care is to inquire patients about their desires of the quality of the administrations they get. Researchers typically focus on the idea of customer's general satisfaction, and patient's particular satisfaction, as a result the recipient's experiences and his expectations are

contrasted. According to psychological theory, a patient's evaluation of a situation is linked to personal feelings, a disparity between impulses and outputs, as well as human expectations and social comparisons (Zineldin, 2006). Patient satisfaction, according to Mulisa et al., (2017), is a compilation of behaviors and expectations of patients about health facilities. Almomania Al-Ghdabib and Banyhamdanc (2020) conducted research in Jordan, the participants of this research were physician/doctors who performing their work in public hospitals. They found that if the hospital increases health service quality, the patient satisfaction can increase.

2. Medical service quality

Healthcare is an intangible substance that cannot be touched, sensed, perceived, counted, or weighed in the same way that manufactured products can be. Because of its intangibility, healthcare service quality is determined by the service process, patient and service provider's experiences (McLaughlin and Kaluzny, 2006; Naveh and Stern, 2005).

There are four models identified for measuring the quality of healthcare services, namely, SERVQUAL, HEALTHQUAL, PubHosQual and HospitalQual models.

SERVQUAL model was published by Parasuraman, Zeithaml, and Berry (1985). The SERVQUAL approach is widely regarded as a significant departure from the traditional method of using perception-based measures as a predictor of customer satisfaction. Carman (1990) used the SERVQUAL model for measuring the quality of healthcare services. There were 9 dimensions to measure service quality, which consisted of admission service, tangible accommodation, tangible food, tangible privacy, nursing care, explanation of treatment, access and courtesy afforded to visitors, discharge planning, and patient accounting. The SERVQUAL model has been used to assess service quality in hospitals and health services in several countries, for example Romania, Turkey, Saudi Arabia, Bangladesh, and Iran, so the researchers used this model to assess service quality perceptions of medical university students, patients at hospitals, and other health centers (Teshnizi, 2018). Patients' desires of healthcare benefit quality on their fulfillment with nursing in public and private clinics in Pakistan were inspected by Javed and Ilyas (2018), who used five dimensions in their study. The Abuosi and Atinga (2013) report, which looked at the quality of health care in Ghana's public hospitals, used these dimensions as well. Al-Borie et al. (2013) conducted another study on a group of patients in Saudi Arabian public and private hospitals.

From Parasuraman et al. (1985), Camilleri and O'Callaghan (1998) created a model called HEALTHQUAL by adapted SERVQUAL model. There were 6 dimensions classified into

efficacy, effectiveness, efficiency, optimality, acceptability, legitimacy and equity. Moreover, healthcare quality is dependent on the technological and interpersonal quality of healthcare services. Technological care is concerned with the medical treatment for patients, while interpersonal care is related to patients' condition (Donabedian, 2005; Donabedian and Bashshur, 2003). However, Asgja and Garg (2010) argued that SERVQUAL model was not appropriate measurement for healthcare service industry. Therefore, they developed new model called PubHosQual model which was suitable to measure the patients' perspective. They used PubHosQual model to measure the quality of public hospitals in India. This model consisted of 24 items grouped into 5 dimensions which were admission, medical service, overall service, discharge and social responsibility.

The latest model was HospitalQual model which was developed by Itumalla, Acharyulu, and Shekhar (2014). They named this model as HospitalQual , and the creation of this model was based on SERVQUAL model. The HospitalQual model helped hospital administrators monitor, control, and enhance the quality of in-patient services. The components of HospitalQual model consisted of medical service, nursing services, supportive services, administrative services, patient safety, patient communication, and hospital infrastructure.

Medical service: When patients needed help, the doctor was quick to respond. Doctors paid close attention to the issue. Customer was satisfied with the amount of time doctors spent with them. The doctor presented ample details about treatment protocols and results.

Nursing services: The nurse provided prompt care. The patient's prescription medicine was delivered to the nurse on time. The nurse was pleasant and supportive.

Supportive services: Diagnostic facilities were available for a shorter wait time at the hospital. The pharmacy had all of the required medications. Healthy food was delivered by the hospital (nutritious, hygiene and timelines). The ward/room was kept clean by the housekeeping staff.

Administrative services: Hospital admission processes was simple. The hospital had adequate facilities for the attendants. The hospital management acted quickly to resolve the patients' issues. The discharge procedure was completed quickly.

Patient safety: The hospital staff's adhered to hygienic treatment (e.g., they always washed hands before tasks, or they usually wore gloves). To minimize the risk of patient

harm from falls, the hospital had appropriate precautions (e.g., beds with side handrails in aisles, and ramps built for wheelchairs).

Patient communication: The staff had sufficient information. The contact between employees was clear. Patients and/or their family members were given adequate therapy during admission to help them make decisions.

Hospital infrastructure: The hospital's physical buildings were physically pleasing. The hospital had all of the requisite and modern equipment. The hospital personnel were well-dressed and tidy.

3. Previous studies applied medical service quality models

Meesala and Paul (2018) studied the relationship among service quality, consumer satisfaction and customer loyalty in the hospital. The data were collected from consumers who used medical services from forty private hospitals in Hyderabad, India. They found that reliability, assurance, responsiveness and empathy which were important components of service quality could affect patient satisfaction and increase their loyalty to the hospital. Manzoor et al., (2019) conducted a research in hospitals to determine the importance of health-care quality in patient satisfaction and found that to reach a high degree of patient satisfaction, all health care delivery institutions have made it a priority to improve patient health care.

The researchers in Middle East countries studied requirements of patients and found that the physical atmosphere of the hospital played a critical role in enhancing service quality. An appealing inside and outside environment, decoration and facilities were the three significant factors to encourage patients to make decision on visiting the hospital. Furthermore, services should be prompt at appointment times. The most important differences between expectations and experiences were found in the necessity of an easy appointment system. The level of enthusiasm, openness, sensitivity, and willingness of medical staff and supported staff in the outpatient department were also concerned by customers. (Khalid and Shahid, 2016). Seoyoung and Eun-Kyung (2017) studied 152 UAE government sponsored patients who visited Korean hospitals and found that medical service quality had positive relationship with revisit intention and customer satisfaction. Medical service of professional doctors, and medical service quality could influence the change in revisit intention about 23.8% (R^2).

Research Methodology

The rational of using Qualitative Research and In-depth Interview

Qualitative research was used because it was one of the most common types of research methodology which allowed researchers to investigate the phenomena of participants' consciousness, experiences, and worldviews. The in-depth interview was chosen as the data collection method because it was appropriate when the researcher needed to study an individual's views and interpret data using his or her language. (Minichiello et al. 1995).

Research Participants

The number of participants was determined by Green and Thorogood (2009), who discovered that the first twenty interviewees conveyed saturation of data. Participants were selected for qualitative research by using the purposive sampling technique. 20 key informants selected to give information for this study were patients or their relations from Middle East countries who used medical service at a case study hospital in Bangkok.

Data Collection Technique

The open-ended questions were created by the researchers to cover and adhere to the research's goals. Three experts reviewed the questions' content validity. All open-ended questions had a validity score of greater than 0.5, and this implied that the contents of each question are valid. (Rovinelli and Hambleton, 1997). At the beginning of the in-depth interviews, the researchers gave all participants the interview questions and explained the context and intent of the study and also clarified how the interview data would be stored and used. Open-ended questions were employed inside a semi-structured interview guide.

The researchers then conducted interview in each participant's room. The researchers requested permission to record the interview with a tape recorder. The researchers spent about 30-45 minutes with each person during the interview. The researchers kept track of the data on a personal computer and an iPad in chronological order. To ensure accuracy, the researchers transcribed each interview right after it took place. Researchers sent each participant the transcripts so that he or she could double-check for any misinterpretations.

There were two general sections in the interview. The first one focused on the personal data of key informants. The second section was related to opinions on factors affecting Arab patients' access to medical services and suggestions for improving service quality.

Ethical Considerations

For ethical concern about the image of hospital, we refrained from using exact name of the hospital.

Since this research included the participants' thoughts and viewpoints, some ethical concerns were considered. The interview questions steered clear of any potential stumbling blocks. Key informants were not compelled to answer questions they did not want to answer. During the interviews, the atmosphere was relaxing and welcoming.

Before any interviews, the respondents were personally told about the study's intent and research methodology. Respondents had the option to withdraw from the study at any point during the interview process. The data were stored in a secure box at the researcher's office for five years after the research project was completed.

Data Analysis

The researchers transcribed documented interviews and double-checked data after each participant's interview process was completed. Researchers coded data into themes and subthemes to transcribe the recorded interviews. To obtain ideas and meanings regarding the participants' views, thematic analysis which included coding, interpretive methods, and recursive abstraction was used. The researchers even deleted data that had little to do with the study's goals. Participants' words were highlighted and used as quotes in the study.

Results

Table 1 The personal data of key informants

Code	Gender	Age	Nationality	Country of origin	Amount of time to do medical services in Thailand	Reference
PATIENT1	male	55	UAE	UAE	60	Relative's recommendations
PATIENT2	male	58	Oman	Oman	3	Relative's recommendations
PATIENT3	male	39	Egypt	Egypt	30	Search information by himself

Table 1 (continued)

Code	Gender	Age	Nationality	Country of origin	Amount of time to do medical services in Thailand	Reference
PATIENT4	male	48	UAE	UAE	2	Friend's recommendations
PATIENT5	male	50	Sudan	Sudan	1	Friend's recommendations
PATIENT6	male	56	Qatar	Qatar	8	Friend's recommendations
PATIENT7	male	45	Oman	Oman	2	Friend's recommendations
PATIENT8	male	28	Oman	Oman	1	Friend's recommendations
PATIENT9	male	53	Oman	Oman	5	Friend's recommendations
PATIENT10	male	32	Oman	Oman	1	Relative's recommendations
PATIENT11	male	51	UAE	UAE	6	Friend's recommendations
PATIENT12	female	36	Qatar	Qatar	2	Friend's recommendations
PATIENT13	male	52	Bahrain	Bahrain	4	Friend's recommendations
PATIENT14	male	64	Oman	Oman	5	Friend's recommendations
PATIENT15	male	45	Kuwait	Kuwait	3	Friend's recommendations
PATIENT16	male	27	UAE	UAE	2	Friend's recommendations
PATIENT17	male	32	UAE	UAE	1	Friend's recommendations

Table 1 (continued)

Code	Gender	Age	Nationality	Country	Amount of time to of origin do medical services in Thailand	Reference
PATIENT18	male	33	Oman	Oman	2	Friend's recommendations
PATIENT19	male	63	UAE	UAE	5	Relative's recommendations
PATIENT20	female	38	UAE	UAE	5	Friend's recommendations

Key informants' opinions toward medical service

There are enough medical devices to be used for each patient when there is a demand, or the medical devices can be supplied as required (PATIENT1, PATIENT2, PATIENT4, PATIENT8, PATIENT12, PATIENT19). Modern medical equipment including MRI, CT SCAN. Surgical devices, such as surgical cameras in the operating room, cardiac catheterization and gastrointestinal endoscopy are provided.

In addition, equipment in the physical room such as a walking trainer (Robowalk) is modern (PATIENT1, PATIENT4, PATIENT7, PATIENT13, PATIENT18, PATIENT20). There is availability of medical equipment including blood pressure monitors. Staff always do regular checks for medical equipment (PATIENT15, PATIENT7, PATIENT8, PATIENT9, PATIENT13, PATIENT20). There are not any problems of the staff's giving such as alarm sound or loading too much saline solution into the patients. The instrument is calibrated (PATIENT7, PATIENT11, PATIENT14, PATIENT18, PATIENT9, PATIENT17).

Patients trust medical treatment. Doctors are skilled. There are no mistakes in disease diagnosis. Doctors provide a treatment plan after the patient has recovered. The service standard that meets JCI standards makes clients feel confident (PATIENT1- PATIENT20).

Relatives can participate in decision-making to treat the patient (PATIENT1).

Patients receive the same service standard level. Medical staff provide good and consistent service, for example, they thoroughly interviewed the patient for prostate treatment. Doctors thoroughly explain about disease and what the methods of treatment are, and they also compare both positive and negative effects for each treatment method.

They also let the patient choose what method he wants and tell the recovery percentage of each method (PATIENT2).

Suggestions for improvement:

Key informants suggested that the doctor should have a regular visit to the patient especially if it he or she is an inpatient. The doctor should visit the patient every day at the same time. After surgery, doctors should sacrifice time to visit patients (PATIENT2, PATIENT3, PATIENT6, PATIENT19, PATIENT20).

For woman patient, the examination and treatment should be provided by a female doctor, especially an obstetrician. (PATIENT1, PATIENT5, PATIENT6, PATIENT12, PATIENT13). During treatment, if female patients need to be examined by a male doctor, a female nurse or helper must be provided. (PATIENT4, PATIENT7, PATIENT8, PATIENT9, PATIENT12, PATIENT16, PATIENT20).

Drug labels should be written in Arabic language in order to make patients and relatives know how to take medicine, and what benefits of medical drugs are (PATIENT2, PATIENT5, PATIENT6, PATIENT9, PATIENT17).

Hospital should develop more specialized medical center (PATIENT1) and hospital should increase the number of doctors with a specific expertise so that patients will not wait too long (PATIENT2). Hospital should invest more in innovative technology for the treatment of diseases, such as laser surgery, Stem cell therapy, PRP (Platelet-Rich plasma), and Pet scan.

It is suggested that hospitals should have a specific health examination program for each person and provide a complete set of self-service counseling on an individual basis (PATIENT11).

Key informants' opinions toward nursing services

Staff are well-dressed in neat uniform (PATIENT1, PATIENT2, PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT8, PATIENT9, PATIENT10, PATIENT11, PATIENT12, PATIENT15, PATIENT17, PATIENT18, PATIENT20). Nursing service is consistent. Nurses always take care of patients well. For example, when patients leave the operating room, a nurse come to take care of them at once, and during their stay in hospital after operation, nurses usually take the patient to walk every day. This makes patients feel warm and appreciated (PATIENT1, PATIENT8, PATIENT10, PATIENT12, PATIENT14, PATIENT15). Nursing staff politely provide services according to their duties and have a heart for services. This can make patients feel warm as they are at home (PATIENT7). It's good that all the nurses should be women (PATIENT3).

Suggestions for improvement:

Key informants recommended proper ways to motivate the patients to do physical activity. Nurses should not force patients to do this. Staff should try to talk to the patient about the benefits of physical therapy, in order to motivate the patient to do physical work (PATIENT1).

Nurses should be able to speak Arabian language because sometimes, the patient's interpreter may stick to his personal mission. It would be better if nurses could speak Arabian language (PATIENT4, PATIENT14, PATIENT15, PATIENT16).

There are still some unskilled staff in the body cleaning process, so all assistants should be trained to perform these basic activities effectively (PATIENT11, PATIENT18).

Patients request that there should be staff and an interpreter in the operating room to attend the patient after the surgery is completed. This is to make the patient feel comfortable when he or she wake up and see someone is there. And if there is a problem, he or she can communicate with the staff in the operating room.

The staff is requested to be arranged to take care of the patient both before and after the surgery in order to relieve anxiety and not to leave the patient alone.

Key informants' opinions toward supportive services

Hospital provides interpreters to take care of the patients. The interpreter is properly dressed with religious clothing (PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT9, PATIENT11, PATIENT17, PATIENT18, PATIENT20).

There is a good shuttle service while other private hospitals in Bangkok do not have this service (PATIENT3).

Hospital even has a wheelchair for Arabs who have large shape (PATIENT7, PATIENT11, PATIENT14, PATIENT18, PATIENT9, PATIENT17).

Suggestions for improvement:

Some staff, such as drivers do not wear hospital uniform. It makes the client unsure whether they are hospital staff or not until they get on the car. Therefore, hospital should inform staff to wear proper uniform (PATIENT2, PATIENT5, PATIENT8, PATIENT9, PATIENT12).

There should be a welcome point in front of the hospital because it is the first point for customers stepping into the hospital (PATIENT13, PATIENT14, PATIENT15, PATIENT16, PATIENT17, PATIENT18, PATIENT19, PATIENT20).

At the initial service point in front of the hospital where the patients get off or get in the car, a staff is requested to be there to take care and support the patients regularly

(PATIENT13, PATIENT14, PATIENT15, PATIENT16, PATIENT17, PATIENT18, PATIENT19, PATIENT20).

Hospital should provide more shuttle buses. Some shuttle buses have to pick up two groups. When the first group gets on the bus, they have to wait for the other group of patients who arrive late, so sometimes the first group has to waste 15-30 minutes to wait. Hospital should have a separate shuttle bus for each group. (PATIENT2, PATIENT7). Moreover, in the shuttle bus, a wheelchair and lifting platform should be provided for some patients who have difficulty to get on and off the bus (PATIENT7, PATIENT10, PATIENT12, PATIENT13). In the case of a patient with difficult mobility, the driver should be trained how to help him or her (PATIENT10, PATIENT12, PATIENT13).

Hospital food is not as fresh and does not warm before serving as the food ordered from outside. Sometimes food is served so late. Arabian people cannot eat after 7 pm. (PATIENT1, PATIENT11, PATIENT12, PATIENT13, PATIENT14, PATIENT15, PATIENT16). Hospital should have Arabian food in canteen or restaurant, and Arabian snacks in patient's room (PATIENT1, PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT8, PATIENT10, PATIENT14, PATIENT20). In patient's room, there should be a microwave oven. Arabian people prefer Starbucks coffee to other types of coffee from Thai coffee shops (PATIENT3).

Hospital should provide other services such as visa extension or immigration services due to the fact that the patients' relatives will follow later (PATIENT5).

Key informants' opinion toward administrative services

The appointment service is good because patients can make appointment in advance, so it is unnecessary to come and wait for long time (PATIENT7, PATIENT9). Patients receive fast service in every step, and they can see a doctor quickly and get MRI service fast. When they want to call staff, they just ring the bell and the staff come quickly. The timing of the treatment is known for every step of the procedure (PATIENT1, PATIENT2, PATIENT3, PATIENT4, PATIENT5, PATIENT7, PATIENT11, PATIENT13, PATIENT14, PATIENT16).

Credit cards are accepted, and this makes it convenient for patients to pay for medical expenses (PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT9, PATIENT11, PATIENT17, PATIENT18, PATIENT20)

Suggestions for improvement:

The hospital should provide money exchange service (PATIENT2, PATIENT4, PATIENT9, PATIENT15, PATIENT17).

Place to sit and wait for the examination should be separated by gender because male and female patients should not sit or wait in the same area. (PATIENT11).

The hospital should provide International medical reimbursement service (PATIENT3).

Key informants' opinions toward patient safety

A safety locker should be provided for the customers to keep personal property and important documents (PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT9, PATIENT11, PATIENT17, PATIENT18, PATIENT20).

Suggestions for improvement:

To enter female patient room, staff should knock on the door of the room first and wait until they get permission because in Arabian rules, a woman must prepare herself by wearing a Hijab and getting dressed properly before meeting any guys who are not her relatives (PATIENT4).

Key informants' opinions toward patient communication

WIFI is the communication system in the hospital that makes communication between patients and their relatives easier. (PATIENT1-PATIENT20).

It is not difficult to search for information about the hospital. Patients just visit the hospital website to get the hospital information, and there are also other information channels such as Facebook and what's app, which make people feel comfortable to contact hospital (PATIENT4). Communication with the hospital staff is convenient (PATIENT18, PATIENT19). People can contact with hospital staff at any time via What's app (PATIENT10, PATIENT11, PATIENT12) or contact the agency's staff who will coordinate them with the hospital (PATIENT14, PATIENT15).

Suggestions for improvement:

The signs in the hospital are requested in 3 languages: Arabic, Thai and English (PATIENT1, PATIENT4). Some important signs in room should be in Arabian language such as fall prevention sign (PATIENT4), No food sign (PATIENT6), No water sign, No smoking sign, Be restrained on bed sign, etc. (PATIENT7).

The hospital's website should have Arabic language. Moreover, it would be good and convenient if customer is able to send the requests or questions through the website and get answers quickly (PATIENT8).

Other services such as arranging female interpreters to take care of female patients should be provided. If the patient is male, interpreter can be any gender. (PATIENT3).

Advertising is highly recommended. Hospital can open booth in Arabian countries to make the Arab people know about it, and the hospital's fame with good treatment and services will help patients and their relatives inform other people with positive word of mouth (PATIENT3 PATIENT4).

Key informants' opinion toward hospital infrastructure

The hospital is quite far from the center of the city. However, patients have an easy access to the hospital from Suvarnabhumi Airport (PATIENT3, M10, PATIENT20).

The hospital has 2 adjacent buildings. It is neither too large nor too small when it is compared with other hospitals in Bangkok. The design of the building, rooms and service counters is modern and beautiful. The rooms are comfortable (PATIENT1, PATIENT2, PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT8, PATIENT9, PATIENT10, PATIENT11, PATIENT12, PATIENT13, PATIENT14, PATIENT15, PATIENT16, PATIENT17). The room decoration in Arab style can make patients feel like they are at home. The rooms are clean. The maids clean the room on time. The room smells fresh, and there are no unwanted disturbances inside the room. The light in the room makes patients feel warm while sleeping (PATIENT2, PATIENT3, PATIENT4, PATIENT8, PATIENT 10, PATIENT17, PATIENT20). There is a complete set of items such as a TV set with Arab channels, a refrigerator, a telephone, a hot water pot, and comfortable mattresses for relatives. Adequate clothes, blankets, linens and pillowcases are provided for use. Drinking water is provided (PATIENT1, PATIENT2, PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT8, PATIENT13, PATIENT16, PATIENT19).

The place of religious worship has good prayer equipment. Prayer room placed on the 7th floor can help patients and their relatives perform the ceremony conveniently (PATIENT2, PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT8, PATIENT9, PATIENT11, PATIENT15).

Suggestions for improvement:

In the room, sofa beds should be changed for the relatives. A mattress for relatives should not be too soft because it will cause back pain (PATIENT2).

The patient' room has no cardinal directions, and this is inconvenient for the prayers who must find the direction to pray. Therefore, they have to memorize the cardinal directions or they have to use the compass in the phone. In Islam the sacred direction is towards Mecca, or more precisely, towards the sacred Kaaba in Mecca. Muslims face this direction in prayer and during various other ritual acts (PATIENT2, PATIENT3, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT8, PATIENT9, PATIENT11, PATIENT15).

The hospital is quite far from the center of the city. However, it is easy to access from Suvarnabhumi Airport. Key informants suggested hospital provide information about nearby accommodation for their relatives (PATIENT1, PATIENT2, PATIENT4, PATIENT5, PATIENT6, PATIENT7, PATIENT11, PATIENT12, PATIENT13).

Key informants' opinion toward other factors

Arab patients come because of the reputation of doctors. Another important thing is service. If the service is good, the Arabs will inform others (PATIENT1, PATIENT2, PATIENT3, PATIENT4, PATIENT7, PATIENT12).

Medical expenses are not duplicated and correct, and they can be examined each item because they are transparent and verifiable. The cost of treatment is reasonable although some treatments seem to be quite expensive but after the patients compare the cost with other hospitals and consider the service received, the expenses can be accepted as a reasonable price (PATIENT4, PATIENT5, PATIENT10, PATIENT15, PATIENT19, PATIENT20).

Suggestions for improvement:

Hospital should always keep level of service at current standard; therefore, patients and their relatives will inform others in their countries. Prices for medical expenses should not be increased because if the hospital charges a high price, patients will use the hospital in their hometown or use service of other big scale hospital in Bangkok instead. If the treatment and the service are good, , and the price is reasonable, many more patients will come. But if the price is high, and the service is not good the Arabs will continue to tell each other and there will be no patients to be healed.

Hospital should have a special treatment price for people who are members. (PATIENT20).

Doctors should go to check health of patients in their countries to screen for disease and suggest how to treat before they travel to Thailand (PATIENT14, PATIENT15).

Discussion

The hospital's success is closely related to the patients' experiences. However, based on what they see and encounter, patients' selective filtering, distortion, and retention can influence their understanding and judgement of service quality whether it was provided with the same consistency or not (Johnston & Clark, 2008). The evaluation of service quality assists service providers in recognizing the unique and unmet needs of patients as well as issues in service delivery. It also aids hospital administrators in developing problem-solving

and quality-improvement programs, as well as allocating resources more efficiently and ensuring high patient satisfaction.

For medical doctors' services, it is important to diagnose the disease and examination accurately and clearly. The reputation of hospital and reputation of the doctor are important in eyes of Arabian people because they usually forward information about the capabilities of the doctors and medical treatment to other Arab people. Georgiadou and Dimitrios (2017) found that the level of timely availability of necessary medications, the level of availability of doctors and nurses, and the level of availability of medical equipment in good working order were important for customer satisfaction. Support staff as the nurses should conduct their tasks with politeness, give their hearts to service, and make patients feel at ease like they are at home. The physician's consultation earned the highest score for service quality, according to the results. Patients also lack adequate information and experiences to evaluate medical personnel. This may explain why they appear to rate them favorably. It should also be remembered that patients are more open to treatment rendered by physicians and nurses during the delivery of health services (Mohammad et al., 2019) Support staff should be in suitable uniform. Supportive equipment such as wheelchair, welcome point should be provided. Shuttle bus service must be available.

Administrative services, hospital should let patients pay for medical expenses in Arab currency. In case the patient has not exchanged money, credit card service must be provided for payment for medical expenses. Service delivery from administrative services should be prompt. Hospital admission processes should be simple. The hospital should have adequate facilities for the attendants. The hospital management should act quickly to resolve the patients' issues. The discharge procedure must be completed quickly. Delays in the provision of hospital services are one of the most critical aspects of care quality, and they can cause patients to have a negative opinion on the quality of the services rendered if they are deemed unacceptable and excessive (Duggirala, Rajendran, and Anantharaman, 2008).

For personal safety, there is a safety locker to let the patients keep personal belongings, important documents that they bring with them. In the communication system, an internet WIFI system should be available to facilitate the patients' communication, so patients are able to contact friends or perform necessary errands. The ability to communicate is a vital feature of the service. It helps with treatment and health and also

keeps patients informed and satisfied. The patient has the right to know everything about their condition and treatment. The doctor should inform them about this on a regular basis.

Food quality, nutritional value should be consistent with Islamic principles. In places for religious ceremonies, waiting zone should be separated by gender for patients / relatives. To the treatment of female patients' case of female patients, staff / nurses must be women. Hospital must provide services in accordance with the Arab culture and traditions. In terms of private hospitals in Malaysia, Sarwar (2014) found that the arrangement of female doctors for female patients influences clients' satisfaction. The hospital can develop and improve service strategies to retain customers for the long term.

In terms of buildings, rooms, and service points, it was found that the Arabs are foreign patients with good economic status. Providing services to this group of customers must focus on location. Hospital infrastructure must be dignified luxurious, beautiful, and modern. dignity, luxury, beauty, and modernity. Arrangement of buildings and facilities for different cultures need to be realized. Hospital must pay attention to the arrangement of the room and the surrounding area, all of which must be based on the tradition, liking and beliefs of the Arab. Convenient patient room and customer lounge should be provided. There is a complete set of items such as TV with Arab channels, refrigerator, telephone, hot water pot, mattresses for relatives, clothes, blankets, linens, pillowcases, bathroom accessories, drinking water, tea, and coffee. Hospital should improve the availability and cleanliness of their seats and restrooms. The hospital should then provide adequate services to patients while improving service quality. In order to maintain the physical environment of the building with its modern decoration and clean appearance, the hospital should focus on the care, responses, and nurses and staff's response. The nurse and staff must then be willing to assist patients and patiently respond to patients' questions. Furthermore, the hospital must improve the doctor's dependability, which is a prerequisite for increasing customer satisfaction and positive word of mouth. The results of this study were supported by Lim et al. (2018), patient's satisfaction is linked to improve the quality of care provided by their providing reliable timely, and accurate hospital data and information.

Patients' expectations of healthcare service quality affect their choice of a healthcare setting and whether they will recommend it to family or friends. To sustain high levels of patient satisfaction, healthcare administrators and clinicians can adopt ongoing quality management programs. The cost of treatment should be reasonable price. Zarei (2015) stated that service costs ranked as the second highest dimensions of services quality.

Patients are likely to be pleased with this aspect of service quality when they pay a small fee for the services. Providing medical services to Arabs must focus on pricing because the Arab people are sensitive to the cost. Arabs tend to investigate the cost of treatment for various diseases from various hospitals and then consider by choosing a hospital with high quality and cheap treatment.

Recommendations

Healthcare and health professionals should always follow procedures that are in line with internal guidelines and best practices. According to research results, the healthcare manager must make an ongoing effort to serve customers with individual attention. It is important that hospital must understand the needs of patients. Researchers have suggestions for management team of a case study hospital as mentioned below:

1. Hospital should establish a policy for the development of professional competence by having a specialized medical center using modern technology and innovation such as comprehensive cancer treatment, bone marrow transplantation, Stem cell therapy, PRP (Platelet-Rich plasma), and laser surgery to serve customers.

2. Hospital should build the hospital with credibility with quality and standards of medical care. A quality of service must be closely monitored in order not to have any incurred errors, the service process must be performed fast, and delivered as promised. Hospital must develop service quality policy based on international standards which is accepted to Arab patients such as JCI (Joint commission international).

3. Hospital should establish a policy to develop environment in service area in Arab style at the luxury level suitable for customers' economic status.

4. The full option service must be started since patients have been in their country until the treatment has been completed. For instance, hospital should have doctors investigate patients' health at their home country, after that inform them how to heal the symptom, and then bring them to have treatment in Thailand.

6. Hospital should establish policy for developing expertise, knowledge, and skills for staff. Doctors and staff should speak Arabic in addition to the English language.

7. Hospital should provide halal food in hospital's canteen or have restaurants which serve Arabian food.

8. Hospital should have marketing plan to target Arab customers, starting from Oman, Arab Emirates and then expand into other countries by conducting marketing

activities such as providing discount programs for memberships or special privileges for members, use of ads, billboards and banners, utilizing the online media services on Facebook, WhatsApp; or delivering exhibition booths in the Arabian countries.

Limitation

The key informants in this study were limited to patients from one private hospital in Bangkok, Thailand. Therefore, the results were come out under a specific set of circumstances in which not every segment of society was represented. Hence, generalization outside the study's actual setting might not be feasible.

Conclusion

The purposes of this research were to study the factors affecting the admission of medical services for customers and to provide guidelines for developing medical service for customers from Middle East countries. The results would be useful to healthcare managers and providers by supporting them with knowledge about the particular needs of their patients. Service quality played an important role in customers' perspective which could influence their satisfaction and loyalty toward service providers. The factors which customers were mostly concerned when they made decision to select hospital relied on the service quality from staff, patient safety, communication methods, infrastructure, hospital reputation, and price. The level of timely availability of necessary medications, the level of availability of doctors and nurses, and the level of availability of medical equipment in good working order were important for customer satisfaction. Arab people needed special offers as their religion was Muslim. Therefore, hospital must understand Muslim culture in order to serve customers in respectful way. It is important that service providers discuss religious observance needs with individual customer. In addition, Muslims were required to follow a halal diet. Islam placed great emphasis on hygiene, in both physical and spiritual terms. They were required to pray five times a day. Patients' expectations of healthcare service quality affected their choice of a healthcare setting and whether they will recommend it to family or friends.

Recommendations for Further Study

The further study should focus on factors in the development of medical services. The study should concentrate on determining the precise relationship between overall perceived quality and social support, patient education, costs, results, access/waiting time, and amenities/environment, and the study should also take into account gender, age, ethnicity, level of education, personal income, and other socio-economic factors that are important to society at large.

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