

The Impact of Corporate Image, Service Quality, Trust, and Perceived Value on Chinese Customer Satisfaction and Loyalty: Medical Services in Thailand

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Abstract

Thailand is committed to becoming the Center of Excellent Health of Asia. About two million foreign patients come to Thailand for medical services each year. With the explosive growth of Chinese tourists including Chinese patients, this study aimed to explore the factors that influence the satisfaction and loyalty of Chinese-speaking patients in the medical service industry. The study extended previous work by investigating Chinese-speaking patients served by a medical institution in Thailand. Specifically, the influence of five dimensions of Service Quality were examined, namely, corporate image, perceived value, and trust on customer satisfaction and customer loyalty. Structural equation model analysis was used to investigate the responses from 406 Chinese-speaking patients using Thai medical services. The finding revealed that medical institution image had a significant positive effect on five dimensions of Service Quality. Some dimensions of Service Quality also had positive effects on perceived value, trust, and customer satisfaction. Trust and perceived value had significant positive effects on customer satisfaction. Customer satisfaction had a significant positive effect on customer loyalty. The results give insights into how improvements might be made to corporate image, personnel training on service quality, and service customization.

Keywords: *Corporate image, service quality, perceived value, trust, customer satisfaction, customer loyalty*

Introduction

According to KResearch (2018), the number of Chinese medical tourists seeking treatment abroad will reach approximately 630,000–650,000, of which at least 40,000 or 6.0% plan to visit Thailand. In order to enhance Chinese-speaking patients' satisfaction level, the purpose of the current research was to explore how to improve Thai medical services through corporate image, service quality, perceived value, and trust to increase customer satisfaction and loyalty (refer to Table 1 for definitions).

The goal in this article was to fill that gap by addressing the following research questions:

- (1). What are the factors that influence customer satisfaction and customer loyalty of Chinese-speaking patients in medical services?
- (2). How do these factors affect customer satisfaction and customer loyalty of Chinese-speaking patients in medical services?

Specifically, this research examined the factors influencing Chinese-speaking patients' satisfaction and loyalty in using medical services in Thailand. In addition, this study explored the influence of trust on Chinese-speaking patients' satisfaction and loyalty in using medical services, including the influence of perceived value on Chinese-speaking patients' satisfaction and loyalty in using medical services there.

Corporate image is considered an important factor in service evaluation (Bitner, 1991). Its formation is based on what customers associate a company with, or information that people know about a company (Martenson, 2007). Favorable corporate image has a positive impact on the behavior of consumers, such as higher prices, more loyal buyers, and a more positive reputation (Bloemer & de Ruyter, 1998). For healthcare institutions, like hospitals, public perception is formed based on public beliefs, thoughts, and impressions (Kotler & Clark, 1987). Furthermore, image is the public awareness of a company or its products. Brand image is defined as a brand association in consumers' memory (Keller, 1993). The hospital images used in this study were adapted by Wu (2011), which involved

excellent facilities, high-quality hospital service, comfortable environment, proper attitudes of doctors, a long history for the hospital, and the most advanced medical equipment.

Service quality involves the judgment of consumers towards the overall superiority or excellence of an entity or service (Zeithaml, 1988; Aaker, 1991; Aaker & Jacobson, 1994). Through utilizing the dimensions of the research instrument Service Quality (SERVQUAL), companies or institutions can understand more clearly the consumers' feelings towards the provision of service. The dimensions considered by SERVQUAL are claimed relevant to the measurement of the quality of service in the healthcare industry (Ladhari, 2009).

Table 1. Definitions and Operational Definitions

Variable	Definitions	Operational Definitions
Corporate Image	The image is the overall impression held by a person (Kotler & Bloom, 1984).	The image is the idea or overall impression of the Chinese-speaking patients on the medical institution.
Service Quality	The consumer's evaluation on the quality of a product or a service (Aaker & Jacobson, 1994).	The evaluation from Chinese-speaking patients on service quality of the medical institution.
Perceived Value	The value of a product or a service in the consumers' heart (Zeithaml, 1988).	The value of medical services in the Chinese-speaking patient's heart.
Trust	Trust is one party's belief that its needs will be satisfied in the future through the action taken by the other party (Anderson & Weitz, 1989).	Trust is the belief of Chinese-speaking patients that their needs will be satisfied in the future through the action taken by the medical service provider.
Customer Satisfaction	A person's feeling of pleasure or disappointment that resulted from comparing a product's perceived performance or outcome against expectations (Kotler & Keller, 2006).	Chinese-speaking patients' feeling of pleasure or disappointment that resulted from comparing the medical process or outcome against expectations.
Customer Loyalty	The relationship between relative attitude and repeat patronage (Dick & Basu, 1994).	The relationship between relative attitude of Chinese-speaking patients and a re-visit to the medical institution for treatment.

The SERVQUAL components are divided into five dimensions: reliability, assurance, tangibles, empathy, responsiveness, all of which are presented through 22 evaluation items, measured by a seven-point Likert scale. Half of the questions (11 items) are used to measure the level of consumer expectations for a particular organization, while the other half (11 items) are used to measure consumer perceptions of the level of service provided by a particular organization (Parasuraman, Zeithaml, & Berry, 1988).

The primary determinant of customer satisfaction is service quality. The second determinant of overall customer satisfaction is perceived value (Fornell, Johnson, Anderson, Cha, & Bryant, 1996). Perceived value is a trade-off between what customers receive, such as quality, benefits, and utilities, and what they sacrifice, such as price, opportunity cost, time, and efforts (Zeithaml, 1988). Perceived value is one of the most important factors in achieving a business competitive advantage (Parasuraman, 1997). Four meanings of value are low price, what customers demand, the trade-off between quality and price—"I get for what I paid" (Zeithaml, 1988). The main difference between perceived value and customer satisfaction is that perceived value can occur at any stage of the purchase, including repurchase, but satisfaction is a post-purchase behavior (Woodruff, 1996).

Previous studies have found that communication is a key factor in enabling trust. Patient safety issues can cause customers to stop using specific hospital services due to a negative reputation (Alrubaiee & Alnazer, 2010). Trusting patients remain vigilant. In other words, trust is not just vague

hope or optimistic thinking. The health service provider must keep patients informed about issues during the care process. The patients confirm that the care process is appropriate when the patient trusts the medical staff. Nonetheless, if and when issues arise, it still is possible for medical services to continue even if patients' trust is harmed (Entwistle & Quick, 2006). Trust is the synthesis of ideas and feelings, and trust is socially-oriented. Trust is a rational choice based on people's understanding of others' motivations (Kramer, 1999). Trust is one party's belief that its needs will be achieved through actions taken by the other party in the future (Anderson & Weitz, 1989). As such, managing consumer trust is particularly important in the marketing of services (Chiou & Droge, 2006). Moreover, based on Social Exchange Theory, consumers' pre-trust has a direct impact on their post-purchase satisfaction (Singh & Sirdeshmukh, 2000).

Satisfaction is a "person's feeling of pleasure or disappointment, which resulted from comparing a product's perceived performance or outcome against his/her expectations" (Kotler & Keller, 2006, p. 144). Satisfaction is considered an attitudinal response to the value judgments that a patient encounters during clinical events (Kane, Maciejewski, & Finch, 1997). Patient satisfaction is considered one of the most important quality dimensions and key success indicators in healthcare (Pakdil & Harwood, 2005). While service quality and consumer satisfaction have certain things in common, satisfaction is viewed generally as a broader concept, while service quality assessment focuses on the dimensions of service (Zeithaml, Bitner, & Gremler, 2006).

Loyalty is the relationship between relative attitude and repeat patronage (Dick & Basu, 1994). Ensuring and increasing loyalty is at the core of many corporate strategies due to the high cost of acquiring new customers, for customer retention is related to long-term profitability (Reichheld, 1993). Satisfaction regulates the relationship between service quality and loyalty (Caruana, 2002). This means that patient satisfaction information is indispensable for managing healthcare quality (Naidu, 2009).

Study Framework and Hypotheses

Corporate image represents a halo effect and its influences customers' satisfaction judgment. The corporate image has a positive influence on service quality. A consumer's perception of performance is influenced by quality, marketing mix, brand name, and corporate image (Andreassen & Lindestad, 1998). The latter is an important factor in service evaluation (Bitner, 1991). There is ample evidence showing that corporate image significantly influences customers' evaluation and judgment, such as the perception of quality (Darden & Schwinghammer, 1985; Andreassen & Lindestad, 1998). For instance, in banking services, a bank's positive image significantly improved perceived service quality (Bloemer & de Ruyter, 1998). Based on these studies, the following hypotheses were generated:

H₁: Corporate image has a significant positive effect on service quality when Chinese-speaking patients are using medical services in Thailand.

H_{1a}: Corporate image has a significant positive effect on the Tangible dimension of service quality when Chinese-speaking patients are using medical services in Thailand.

H_{1b}: Corporate image has a significant positive effect on the Responsiveness dimension of service quality when Chinese-speaking patients are using medical services in Thailand.

H_{1c}: Corporate image has a significant positive effect on the Reliability dimension of service quality when Chinese-speaking patients are using medical services in Thailand.

H_{1d}: Corporate image has a significant positive effect on the Assurance dimension of service quality when Chinese-speaking patients are using medical services in Thailand.

H_{1e}: Corporate image has a significant positive effect on the Empathy dimension of service quality when Chinese-speaking patients are using medical services in Thailand.

Service quality has a significant effect on perceived value (Dodds, 1985). Service quality awareness was previously found to be positively correlated with satisfaction and value (Brady & Robertson, 2001). It is frequently assumed that perceived value is highly correlated with service quality and customer satisfaction (Tarn, 1999). Previous studies have shown that service quality also plays a predictive role in the perceived value of a product for consumers (Bolton & Drew, 1991; Chen & Hu, 2010; Zeithaml, 1988). Consistent with previous research, the following hypotheses were generated:

H₂: Service quality has a significant positive effect on perceived value when Chinese-speaking patients are using medical services in Thailand.

H_{2a}: The Tangible dimension of service quality has a significant positive effect on perceived value when Chinese-speaking patients are using medical services in Thailand.

H_{2b}: The Responsiveness dimension of service quality has a significant positive effect on perceived value when Chinese-speaking patients are using medical services in Thailand.

H_{2c}: The Reliability dimension of service quality has a significant positive effect on perceived value when Chinese-speaking patients are using medical services in Thailand.

H_{2d}: The Assurance dimension of service quality has a significant positive effect on perceived value when Chinese-speaking patients are using medical services in Thailand.

H_{2e}: The Empathy dimension of service quality has a significant positive effect on perceived value when Chinese-speaking patients are using medical services in Thailand.

The quality of interactive services exerts a significant positive influence on perceived trust in luxury goods trading of high-participation services (Chiou & Droge, 2006). The service quality provided by lenders also had a positive influence on consumer trust in financial institutions (Cho & Hu, 2009). An empirical study of hospital inpatients found that patients' awareness of medical quality had a positive impact on trust (Alrubaiee & Alkaa'ida, 2011). In alignment with previous studies, the following hypotheses were made:

H₃: Service quality has a significant positive effect on trust when Chinese-speaking patients are using medical services in Thailand.

H_{3a}: The Tangible dimension of service quality has a significant positive effect on trust when Chinese-speaking patients are using medical services in Thailand.

H_{3b}: The Responsiveness dimension of service quality has a significant positive effect on trust when Chinese-speaking patients are using medical services in Thailand.

H_{3c}: The Reliability dimension of service quality has a significant positive effect on trust when Chinese-speaking patients are using medical services in Thailand.

H_{3d}: The Assurance dimension of service quality has a significant positive effect on trust when Chinese-speaking patients are using medical services in Thailand.

H_{3e}: The Empathy dimension of service quality has a significant positive effect on trust when Chinese-speaking patients are using medical services in Thailand.

Service quality awareness is positively correlated with satisfaction and value (Brady et al., 2001). The primary determinant of customer satisfaction is service quality (Fornell et al., 1996). Previous work has provided empirical evidence of the impact of service quality on patient satisfaction with health care (Vinagre & Neves, 2008). Based on previous research, it was hypothesized that:

H₄: Service quality has a significant positive effect on satisfaction when Chinese-speaking patients are using medical services in Thailand.

H_{4a}: The Tangible dimension of service quality has a significant positive effect on satisfaction when Chinese-speaking patients are using medical services in Thailand.

H_{4b}: The Responsiveness dimension of service quality has a significant positive effect on satisfaction when Chinese-speaking patients are using medical services in Thailand.

H_{4c}: The Reliability dimension of service quality has a significant positive effect on satisfaction when Chinese-speaking patients are using medical services in Thailand.

H_{4d}: The Assurance dimension of service quality has a significant positive effect on satisfaction when Chinese-speaking patients are using medical services in Thailand.

H_{4e}: The Empathy dimension of service quality has a significant positive effect on trust when Chinese-speaking patients are using medical services in Thailand.

Before purchasing a service or product, consumers may not know the exact result of their purchase. Therefore, managing consumer trust is particularly important in marketing services (Chiou

& Droge, 2006). Based on social exchange theory, consumers' pre-trust has a direct impact on their post-purchase satisfaction (Singh & Sirdeshmukh, 2000). Hence, the following hypothesis is stated:

H₅: Trust has a significant positive effect on customer satisfaction when Chinese-speaking patients are using medical services in Thailand.

The second determinant of overall customer satisfaction is perceived value (Fornell et al., 1996). Customer satisfaction is considered highly relevant to “value” (Athanasopoulos, 2000). In addition, the other researchers suggest that perceived value has a positive impact on customer satisfaction (Cronin, Brady, & Hult, 2000). Aligning with previous studies, it is hypothesized here that:

H₆: Perceived value has a significant positive effect on customer satisfaction when Chinese-speaking patients are using medical services in Thailand.

The relationship between service quality and loyalty is regulated by satisfaction (Caruana, 2002). As an overall assessment established over time, satisfaction generally modulates the impact of product quality, service quality, price, or payment fairness on loyalty (Fornell et al., 1996). Hence, it is hypothesized that:

H₇: Customer satisfaction has a significant positive effect on customer loyalty when Chinese-speaking patients are using medical services in Thailand.

The theoretical framework illustrating the SERVQUAL components and their perceived contribution to customer satisfaction and loyalty are shown in Figure 1.

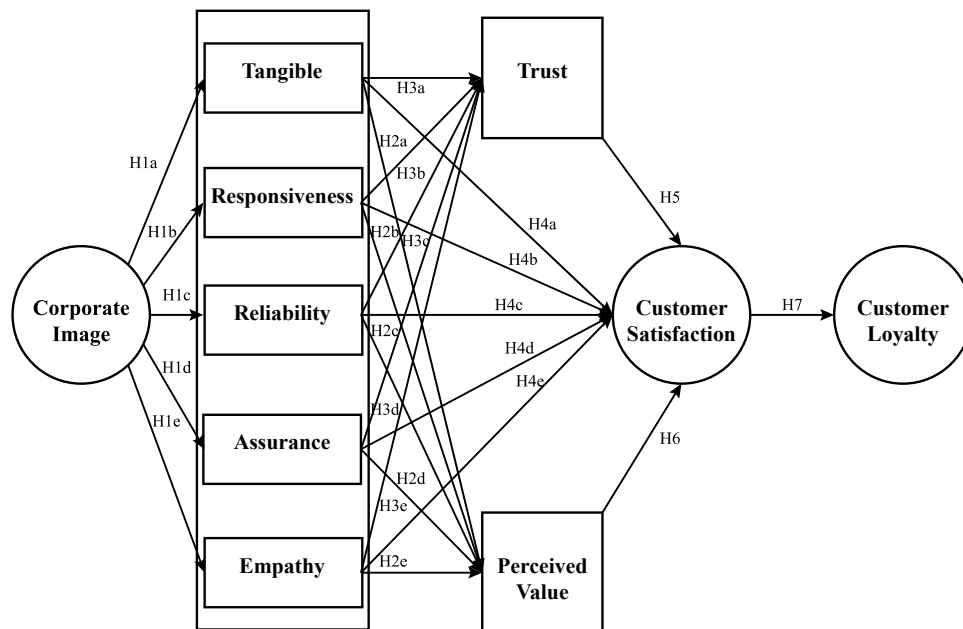


Figure 1. Theoretical Framework of SERVQUAL Components and Their Perceived Influence on Customer Satisfaction and Loyalty

Methodology

The target population of this study was Chinese-speaking patients who received medical treatment from a Thai medical institution. A pilot study was conducted using 30 participants to test the reliability and validity of the questionnaire. After the pretest, data were collected from 450 patients through convenience sampling. The participants completed a self-administered questionnaire survey. A total of 406 useable responses were obtained for data analysis.

In this study, the survey consisting of 45 items adapted from previous research to measure 10 variables: six items for corporate image (Wu, 2011), 22 items for five dimensions of SERVQUAL

(Parasuraman et al., 1988), five items for perceived value (Zeithaml, 1988), and six items for trust (Yamagishi & Yamagishi, 1994), three items for customer satisfaction (Fornell et al., 1996), and three items for customer loyalty (Beerli, Martín, & Quintana, 2004). Service quality, perceived value, customer loyalty, corporate image were rated using a seven-point Likert scale, the measurement of trust utilized a five-point Likert scale, and customer satisfaction used a 10-point Likert scale.

Several steps were taken in the data analysis process. First, Cronbach's alpha was used to analyze the reliability of the scale used to measure all variables. Second, the questionnaire's discriminant validity was measured using confirmatory factor analysis (CFA). Finally, structural equation modeling (SEM) was used to test the proposed model and its underlying assumptions.

Results and Discussion

Demographic information of the respondents is summarized in Table 2. The majority of clients came from China/Hong Kong, with a majority being in the age bracket 26–45 years. A surprising number had visited repeatedly. These statistics have relevance to the limitations highlighted later as well as the interpretation of future studies.

Table 2. Characteristics of Respondents ($N=406$)

Items	Percent	Items	Percent
Age (years)		Country	
18–25	4.19	China	81.53
26–35	39.14	Taiwan	1.72
36–45	25.62	Hong Kong	8.62
46–55	15.27	Singapore	4.93
56–65	11.33	Myanmar	2.46
Above 65	4.19	Vietnam	0.74
Gender		Visit Frequency	
Female	62.07	1–2 times	44.58
Male	37.93	3–5 times	9.11
		6–10 times	12.56
		Above 10 times	33.74

The Cronbach's alpha results for all variables in the questionnaire ranged from .945 to .989. However, after CFA analysis, the questionnaire was modified. Twenty six items were used to measure the 10 variables (three items for corporate image, 12 items for five dimensions of service quality, three items for perceived value, three items for trust, two items for customer satisfaction, and three items for customer loyalty). The CFA results are shown in Table 3.

Table 3. Results of Confirmatory Factor Analysis (CFA) and Model Fit

Item	CMIN	<i>p</i> -value	Degree of Freedom	GFI	AGFI	CFI	NFI	RMR	RMSEA
CFA Model of Service Quality	74.140	.003	44	.970	.947	.995	.988	.011	.041
CFA Model of Corporate Image and Service Quality	231.782	.000	83	.927	.894	.981	.971	.060	.067
SEM Model	573.355	.000	276	.903	.876	.978	.959	.077	.052

Abbreviations Key: Minimum Value of Discrepancy (CMIN), Goodness of Fit Index (GFI), Comparative Fit Index (CFI), Normed Fit Index (NFI), Root Mean Residual (RMR), Root Mean Square Error of Approximation (RMSEA)

All variables in the initial research model were tested in order to establish whether the data fitted the hypothetical model. The results for the complete structural model show significant chi-square values ($\chi^2 = 573.355$, $df = 276$, $p < .000$). Rejection region (RR) = $\{\chi^2 \geq \chi^2_{\alpha}(df)\}$, $\chi^2_{0.05}(276) = 315.749$. Thus, $\chi^2 \in RR$; the null hypothesis was rejected.

Chi-squared statistics are affected mainly by the sample size and the complexity of the model (Hair, Ringle, & Sarstedt, 2011). Therefore, other goodness of fit measures were used, such as goodness of fit statistic (GFI), adjusted goodness of fit statistic (AGFI), comparative fit index (CFI), normed fit index (NFI), root mean square residual (RMR), and root mean square error of approximation (RMSEA) (Hair et al., 2011). The ratio produced by the proposed model ($\chi^2/df = 2.077$) was still below the 3.0 threshold. The values of GFI, AGFI, CFI, NFI, RMR, and RMSEA are shown in Table 3. As mentioned earlier, the accepted threshold values for the χ^2/df ratios should be less than three; GFI, AGFI, NFI, and CFI values should be higher than the minimum standard of .9; and the recommended value for RMR and RMSEA ideally should be less than .05, but is acceptable up to .08 (Hair, Anderson, Tatham, & Black, 1998). On the basis of the results obtained, AGFI and NFI were satisfactory according to Hoyle (1995). As a result of the overall statistical analyses, the proposed structural model was found to have a good fit. SEM results: CMIN = 573.355, p -value = .000, df = 276, GFI = .903, AGFI = .876, CFI = .978, NFI = .959, RMR = .077, RMSEA = .052.

Corporate Image and Service Quality data are consistent with past research results, and the current study showed that corporate image had a significant influence on service quality (Table 4). Hence, H_1 is supported. Bloemer and de Ruyter (1998) proposed that the link between image and loyalty is driven by customer evaluation (such as service quality and satisfaction). In previous studies, there was evidence indicating that corporate image strongly influenced the customers' evaluation and judgment, such as the perceptions of quality (Darden & Schwinghammer, 1985; Andreassen & Lindestad, 1998). For H_2 , service quality had a positive relationship with responsiveness, reliability, and empathy. The result is consistent with past research results, which is that service quality has a significant influence on perceived value. Consumer trust comes when medical institutions accurately fulfill their service commitments, provide timely services to help customers, and have a caring and personalized focus on customers. With regards to H_3 , the results showed that two dimensions of service quality (Reliability and Empathy) had a significant impact on perceived value; reliability was the most significant dimension for perceived value. This implies that customers think that the value of the medical institutions comes from the medical institutions' ability to fulfill its promised services and personal care. Customer Satisfaction and Service Quality (H_4) returned results consistent with past findings, and the current study showed that service quality had a significant influence on customer satisfaction. The results of this study also show that customer satisfaction had positive relationships with the Tangible, Responsiveness and Empathy elements of service quality. This implies that consumer satisfaction comes from the medical institutions' actual facilities, equipment and service personnel, and the willingness to help customers and services quickly, as well as care and individual services. The H_5 result is true in the current study, for trust has a very significant impact on customer satisfaction. This implied that if the customer trusts the medical institutions, customers' satisfaction would also increase significantly. Customer Satisfaction and Perceived Value (H_6) data corresponds with past research by Fornell et al. (1996). Perceived value had a significant impact on customer satisfaction. The result means that a patient's perceived value of medical institutions influenced their level of satisfaction. Customer Satisfaction and Customer Loyalty (H_7) data are consistent with past research results. The results show that service quality had a significant influence on customer satisfaction, and customer satisfaction had a very significant influence on customer loyalty. This implied that high customer satisfaction can make customers more loyal to medical institutions.

Implications

According to the "Centre of Excellent Healthcare of Asia" planned by the Thai government, the number of people who come to Thailand to seek medical care from all over the world will gradually increase. With the increase in the number of customers, in order to prevent the loss of customers, companies need to maintain re-visits by customers, they need to create customer loyalty. In this study the impact of satisfaction for loyalty has been confirmed. Also confirmed were service quality, trust, and perceived value, which had a significant impact on satisfaction. In addition, corporate image was confirmed as having a significant impact on the five dimensions of service quality. All the above

variables investigated, trust, perceived value, and satisfaction were affected by different dimensions of service quality.

This study showed that corporate image has an impact on the five dimensions of service quality. Medical institutions managers should realize that corporate image has a significant influence on consumer perception of their services. The reliability and empathic quality of service offered had a significant impact on trust, especially reliability. With this variable, it can be seen clearly that customers are more concerned about the special attention from medical institutions and the medical institutions' ability to accurately fulfill service commitments than the tangible equipment such as buildings. In the perceived value area, there were significant effects attributable to responsiveness, reliability, and empathy. This means that customers were impressed by the willingness from service providers to help them promptly, the ability to fulfill promises, and the provision of individual attention. For customer satisfaction, the most influential factors were empathy and responsiveness, followed by the tangible elements of customer service.

Table 4. Summary of Testing Results

Hypothesized Path	Standardized Coefficients (β)	Composite Reliability (t -value) [†]	Results
H1 a. Corporate Image → Tangible	.057	21.253***	Supported
b. Corporate Image → Responsiveness	.086	13.633***	Supported
c. Corporate Image → Reliability	.064	22.175***	Supported
d. Corporate Image → Assurance	.072	12.642***	Supported
e. Corporate Image → Empathy	.090	9.890***	Supported
H2 a. Tangible → Perceived value	.310	-0.792*	Not supported
b. Responsiveness → Perceived value	.059	2.541*	Supported
c. Reliability → Perceived value	.285	3.076*	Supported
d. Assurance → Perceived value	.065	0.132	Not supported
e. Empathy → Perceived value	.052	2.936*	Supported
H3 a. Tangible → Trust	.152	-2.484*	Not supported
b. Responsiveness → Trust	.026	1.719	Not supported
c. Reliability → Trust	.140	4.832***	Supported
d. Assurance → Trust	.029	1.636	Not supported
e. Empathy → Trust	.023	2.253*	Supported
H4 a. Tangible → Customer Satisfaction	.352	2.698*	Supported
b. Responsiveness → Customer Satisfaction	.058	7.359***	Supported
c. Reliability → Customer Satisfaction	.348	-1.807	Not supported
d. Assurance → Customer Satisfaction	.063	0.683	Not supported
e. Empathy → Customer Satisfaction	.052	6.678***	Supported
H5 Trust → Customer Satisfaction	.592	4.257***	Supported
H6 Perceived Value → Customer Satisfaction	.053	2.492*	Supported
H7 Customer Satisfaction → Customer Loyalty	.506	16.116***	Supported
Model Goodness-of-fit Statistics: $\chi^2 = 573.355$ ($p < .000$); $df = 276$; $\chi^2/df = 2.077$; GFI = .903; AGFI = .876; CFI = .978; NFI = .959, RMR = .077; RMSEA = .052			

[†] Cut off t -value is 1.96 (* $p < .05$, *** $p < .001$)

Based on the above managerial implications, several suggestions are made. First, this study found that corporate image had a comprehensive effect on improving service quality. Managers hence might develop appropriate plans to enhance the image of the medical institutions. Second, of the five dimensions of service quality investigated, assurance has no significant effect on the other variables. It could be considered that the politeness of employees was not the key factor in satisfaction among the clients surveyed. Third, trust had a positive effect on satisfaction. In order to build customer trust in the medical services process, first-line communication personnel are the individuals that medical institutions should focus their training efforts on. In other words, when customers are communicating with a highly trained employee, this may be key to creating customer loyalty to the medical institution. Fourth, in terms of trust, perceived value and customer satisfaction, empathy was the only dimension that has a significant impact on all. This is interpreted to mean that if medical services providers are not able to provide a customized service, then the level of trust, value, and satisfaction would have negative effects.

In order to enhance the image of the institutions to the Chinese market, managers might pay attention to corporate image. In this study, corporate image had a significant impact on service quality. Therefore, institutions might consider setting up a special marketing team or Chinese advertising marketing program for medical services. However, in the medical services process, patients are not served by Chinese service staff alone, but they are also served by other service personnel. As mentioned above, in order to increase the speed of treatment, it is recommended that medical institutions consider providing basic Chinese skills to other staff and arrange services for Chinese guests systematically, such as setting up clear Chinese language flowcharts, and pharmaceutical Chinese-English reference books. Establishing a systematic process would avoid unnecessary human resource waste. The most important thing is that improving service efficiency can improve customer satisfaction, which encourages a customer to revisit again. The importance of individual services was confirmed by this investigation. Therefore, providing individualized services can give customers a sense of trust to the medical institutions, as well as leading to a higher evaluation, which in turn affects satisfaction and loyalty.

Conclusions

This study identified factors that influenced the satisfaction and loyalty of Chinese patients in the medical service industry in Thailand. The impact of five dimensions of SERVQUAL was investigated, i.e., corporate image, perceived value and trust on customer satisfaction and customer loyalty. The data demonstrated impacts of Corporate Image, Service Quality, Trust, and Perceived Value on Customer Satisfaction and Loyalty for the Chinese-speaking patients. Initiatives were suggested in improving medical institutions' corporate image, personnel training on service quality, and service customization.

Several limitations were inherent in the study. This includes the study of Chinese-speaking patients and data from one hospital in Thailand, the number of visits by clients varied widely, and the focus was on the overall service quality, and not on specific processes or types of medical services. Future studies might approach the issues from different perspectives. For example, different types of services in various departments in medical institutions could be investigated. It is also unclear why Chinese-speaking patients come for medical treatment, such as patients seeking in-vitro fertilization in Thailand. Although customer trust, perceived value, and satisfaction have pointed to the dimensions of service quality affected, they do not clearly indicate which segments or processes the customers are experiencing in the medical service. Future research could improve on this by examining specific customer segments and/or processes that have impacts on customer satisfaction and loyalty in order to improve the overall customer experience.

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