ABSTRACT

From the customer's point of view, the most vivid impression of service occurs in the service encounter, or the "moment of truth", when the customer interacts with the service firm. A service encounter occurs every time a customer interacts with the service organization. (Shostack, 1985) There are two general types of service encounters: remote encounters and face-to-face encounters. A customer may experience any of these types of encounters, in his or her relations with a service firm.

In this research, we are trying to evaluate the service encounter, where the core service that is health care is delivered through remote service encounter i.e. indirect channel and through face-to-face encounter i.e. direct channel.

Due to the importance of service encounters in building quality perceptions and ultimately influencing customer satisfaction, researchers have extensively analyzed service encounters in many contexts to determine sources of customer's favourable and unfavourable perceptions. There isn't much research regarding satisfaction studies in remote service encounters in health care.

The reason why health care is separate from other services is because of the credence qualities of health care service. Service characteristics that customers find impossible to evaluate confidently even after purchase and consumption are known as credence attributes because the customer is forced to trust that certain benefits have been delivered, even though it may be difficult to document them. An example would be, patients can't

Long-term relationships are built through social and interpersonal bonds. Customers are viewed as “clients”, not nameless faces, and become individuals whose needs and wants the firm seeks to understand. Services are customized to fit individual needs and service providers find ways of staying in touch with their customers, thereby developing social bonds with them.

Social, interpersonal bonds are common among professional service providers and their clients as well as among personal care providers (like health care providers) and their clients. A doctor who takes a few minutes to review the patient’s file before coming in to the exam room is able to jog his/her memory on personal facts about the patient (occupation, family details, interests, health history). By bringing these personal details into the conversation, the doctor reveals his/her genuine interest in the patient as an individual and develops social bonds.

Social and Interpersonal bonds are difficult to achieve in remote health care settings. The doctor is oblivious of the personal facts about the patient such as occupation, interests, family details etc. In a remote health care setting, the patient is not experiencing a common
environment with the doctor, which he/she would have otherwise experienced in a face-to-face setting. In such a situation it is difficult for the doctor to create and sustain relationship building. Social and interpersonal bonding helps the doctor deliver service to the patient and it could be one of the factors influencing customer satisfaction. (Crosby et al, 1990) Hence it could be said that due to the nature of remote health care service, which is an impersonal or indirect channel of service delivery, it is difficult to achieve interpersonal bonding between the doctor and the patient.

Thus we see that channel of service delivery impacts customer satisfaction when the service is delivered in a high involvement high complexity situation.

This thesis examines the impact of service delivery channel on consumer satisfaction in high involvement high complexity situations.

The research is conducted using two sampling units:

➢ Patients availing of health care service through impersonal channel of service delivery (telemedicine)

➢ Patients availing of health care service through direct channel where there is face-to-face contact between patient and healthcare provider.

The sample size chosen for each of the two sampling units is 200. Hence a total of 400 patients are surveyed. A probability sample is chosen. Simple random sampling method is used. Statistical Inferential Analyses of data obtained from the surveys is carried out using the SPSS software package. The data from the questionnaires are tabulated, and analyzed using step-wise regression.
The major findings of the research are enumerated below:

[I] The relationship between complexity and satisfaction is negative when the channel of delivery is indirect in high involvement services.

[II] There is no relationship between complexity and satisfaction when the channel of delivery is face-to-face (direct) in high involvement services.

[III] Complexity moderates the relationship between predictor variables and satisfaction within face-to-face (direct) channel in high involvement services.

[IV] Predictor variables of satisfaction vary between channels in high involvement services in both high and low complexity situations.