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The Impact of Service Recovery Actions and Perceived Justice on Customer Satisfaction: Insights from Thailand's Private Hospitals

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ABSTRACT: The research explores service recovery strategies' impact on customer satisfaction, word-of-mouth (WOM), and revisit intention in private hospitals in Thailand, drawing upon the expectation confirmation theory and social exchange theory. Using a quantitative approach, data was collected via an online questionnaire from service users of private hospitals in Thailand, with 600 usable responses analyzed using Structural Equation Modeling (SEM) and multi-group analysis with SEM. The findings reveal that service recovery actions (SRA) and perceived justice (PJ) significantly influence customer satisfaction with service recovery, WOM, and revisit intentions. Focusing on tangible actions and perceived justice can enhance customer retention in private hospitals. Private hospitals should emphasize tangible actions and perceived justice to enhance customer satisfaction and retention. Additionally, tailoring service recovery efforts based on customers' varying experience levels within the healthcare sector is crucial. The research contributes valuable insights to the healthcare industry's understanding of service recovery strategies, offering guidance for marketing strategy planning and enhancing customer satisfaction and retention in private hospitals in Thailand.

Keywords: Service Recovery Actions; Perceived Justice; Satisfaction; WOMs; Revisit intention

1. INTRODUCTION

Service recovery involves a company's efforts to monitor and address failures in the service delivery process [1]. Despite diligent efforts, companies can only partially eliminate failures.

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However, they can proactively identify and address these failures through strategic measures. The unique characteristics of service-oriented business challenges frequently arise within the service sector throughout the service journey [2]. Effective service recovery strategies are crucial in promptly addressing service failures and restoring customer satisfaction [3]. The service recovery strategy aims to regain satisfaction among dissatisfied customers, with scholarly research focusing on various aspects of this strategy. Academics have examined behavioural responses, including apologies, explanations, problem-solving techniques, response speed, and employee efforts [4] follow-up [5]. The following study focused on customers' perception customers', outlining three dimensions: distributive, interactional, procedural [6], [7], and informational justice [8]. The effectiveness of behavioural responses in service recovery may only sometimes apply across service contexts due to their varying effectiveness. Staff performance in resolving service failures is challenged by the reliance on customers' subjective, known as perceived justice. Perceived justice encompasses addressing both tangible aspects of the failure and managing interpersonal dynamics, posing a complex challenge for staff during service recovery. While the literature extensively covers service recovery actions and perceived justice within service recovery contexts, there needs to be more research regarding the need for more conclusive evidence to determine the superior approach between service recovery actions and perceived justice.

Thailand has cemented its status as a leading hub for medical tourism, thanks to its renowned reputation for delivering exceptional healthcare services. Notably, it ranks 13th globally among countries recognized for their exemplary healthcare systems [9]. Private hospitals, operating within the service sector, provide healthcare services to patients as service users. The management of patients with medical issues or illnesses presents greater challenges regarding service failures compared to other service sectors [10]. Considering the nature of healthcare services, which involve addressing both physical and psychological discomfort associated with illness, implementing the service recovery process can be challenging. Hospital errors frequently stem from prolonged waiting times experienced by patients [11]. Mistakes such as extended waiting times for treatment, appointment errors, impolite staff behavior, ventilation system malfunctions, or inadequate facilities may occur in healthcare settings. Errors in medical services carry greater consequences compared to other service industries because of the heightened concern for health and well-being. Hence, it is vital for private hospitals to establish guidelines for service recovery strategies in the healthcare sector. These guidelines ensure the effectiveness of the service recovery process and

foster the development of service excellence to maintain high service standards [12].

This research contributes to the existing literature on service recovery in multiple ways. Firstly, it advances the understanding of service recovery strategies within the healthcare sector. Secondly, it identifies two distinct service recovery strategies: actions to address issues and perceived fairness. Lastly, it validates the connections between satisfaction and potential outcomes such as word-of-mouth communication and revisit intentions, which are crucial for customer retention and improving service quality [4], [13], [14]. Ultimately, segmenting customers according to their historical experiences can provide valuable insights for formulating marketing strategies tailored to the requirements of each segment. This approach enables the proactive identification of customers before engaging in the service recovery strategy, facilitating more targeted and effective interventions in response to service failures. The research objectives are to 1) to investigate the impact of service recovery strategies within private hospitals in Thailand. 2) to examine how satisfaction resulting from service recovery influences word-of-mouth recommendations (WOMs) and revisit intentions. 3) to explore differences between customers who have experienced service failures and subsequent recovery efforts and those who have not encountered such issues.

2. CONCEPTUAL FRAMEWORK

The ECT examines service recovery strategy as a determinant of satisfaction with service recovery efforts. On the other hand, the SET elucidates the exchange processes between satisfaction with service recovery strategies, word-of-mouth recommendations (WOMs), and revisit intention. This conceptual framework is depicted in Figure 1.

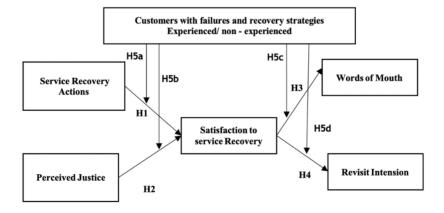


Figure 1 Conceptual Framework

3. METHOD

The sample data were collected through an online self-administered questionnaire using G-Forms, employing purposive sampling to recruit experienced users of private hospitals in Thailand within the past six months. This timeframe ensures that participants can accurately recall their service experiences. Respondents must be over 20 years old to ensure maturity. Before completing the survey, participants receive a brief explanation of service recovery in the healthcare context. The anticipated sample size is 600 usable respondents. A scenario-based experiment, aligned with the questionnaire on service recovery actions and perceived justice, was conducted to ensure respondents understand the same circumstances and can provide informed opinions. The survey comprises six parts measured on a 1-5 Likert scale, adapted from previous studies: service recovery actions [5], [15], perceived justice [16], [17], satisfaction [18], [19], WOMs [20], and revisit intention [21].

The questionnaire was meticulously translated into Thai with back translated method and validated by three marketing experts using the item-objective congruence evaluation (IOC). A pilot test was conducted with 50 respondents to assess construct measurement and language clarity. IOC has all accepted with greater than 0.5 [22], and reliability was assessed with Cronbach's alpha greater than .70 [23]. A total of 1,180 survey responses were received between May and July 2022. Data screening was conducted to eliminate false responses or misconduct, excluding cases with a mean standard deviation (S.D.) less than 0.50 to avoid lower intentions respondent and bias from online survey [24]. Finally, 600 valid responses were analysed.

4. RESULTS

The 600 participants were service users or customers of private hospitals in Thailand within six months of completing the questionnaire. Table 1 presents the demographic characteristics of the sample population. Of the participants, 59.8% were female and 40.2% were male. Regarding marital status, 79.5% were single, while 20.5% were married. Respondents ranged from 20 to 59 years, with an average age of 27.6 years. Most participants (77.0%) fell within the 20-30 age bracket. Regarding personal monthly income, the highest proportion (40.2%) reported incomes between \$401 and \$1,000. Regarding educational background, 68.0% of respondents were graduates, while 16.3% were undergraduates. The most common occupations among participants were students (35.7%), business owners (27.3%), and employees (13.5%).

Additionally, 58.3% of participants reported experiencing service failures and subsequent recovery efforts, while 41.7% had not encountered such experiences.

Table 1 Demographic characteristics

Items	Categories	Frequency	Percentage	
			(%)	
Gender	Male	241	40.2	
	Female	359	59.8	
Status	Single	477	79.5	
	Married	123	20.5	
Age (Years)	20-30	462	77.0	
	31-40	92	15.3	
	41-50	32	5.3	
	Above 51	14	2.3	
Personal Monthly	Less than \$400	164	27.3	
Income (\$)	Between \$401-	241	40.2	
	\$1,000	61	10.1	
	More than \$1,001	134	22.3	
	Others			
Education	Under- graduated	98	16.3	
background	Graduated	408	68.0	
	Post- graduated	51	8.5	
	Others	43	7.2	
Occupations	Student	214	35.7	
	Employee	81	13.5	
	Government	26	4.3	
	officer	164	27.3	
	Business owner	115	19.2	
Experienced in	Others	350	58.3	
service failures	Experienced	Experienced 250		
	Non - Experience			

Confirmatory Factor Analysis

Table 2 presents the results of the measurement model analysis, including the Composite Reliability (CR), Average Variance Extracted (AVE), factor loadings, and Cronbach's alpha. Cronbach 'alpha greater than .70, indicating acceptable internal consistency. Additionally, both CR and AVE values for all items exceeded 0.70 and 0.50, respectively, confirming the validity of all measurements [25]. Confirmatory Factor Analysis (CFA) was conducted for service recovery actions and perceived justice using second-order CFA. The results indicated good fit indices for service recovery actions (CMIN/df = 3.680; p < 0.01; GFI = 0.944, CFI = 0.978; RMSEA = 0.067; SRMR = .023) and perceived justice (CMIN/df = 2.930; p < 0.01; GFI = 0.944, CFI = 0.979; RMSEA = 0.057; SRMR = .022). Similarly, satisfaction, WOMs, and revisit intention were analysed using first-order CFA. The results revealed excellent fit indices for satisfaction (CMIN/df = 0.448; p < 0.01; GFI = 0.999, CFI = 1.000; RMSEA = 0.000; SRMR = .003), WOMs (CMIN/df = 0.026; p < 0.01; GFI = 1.000, CFI = 1.000; RMSEA = 0.001; SRMR = .000), and revisit intention (CMIN/df = 1.128; p < 0.01; GFI = .999, CFI = 1.000; RMSEA = 0.022; SRMR = .004). These results indicate that all parameters meet the criteria for a good fit [23].

Table 2 Measurement model analysis of items

Factor		Item	Loading	Cronbach'	s CR	AVE
			(Standardized)	alpha		
Service Recov	erı	y Actions				
Apology		AP1	.887	.935	.936	.784
		AP2	.888			
		AP3	.880			
		AP4	.887			
Explanation		EX2	.909	.912	.912	.777
		EX3	.886			
		EX4	.848			
Problem-		PS1	.883	.903	.903	.756
solving		PS2	.868			
		PS3	.857			
Speed o	of	SR1	.856	.919	.915	.729
Response		SR2	.852			
		SR3	.874			
		SR4	.831			

Perceived Justic	re				
Distributive	DJ1	.763	.904	.896	.633
	DJ2	.750			
	DJ3	.778			
	DJ4	.817			
	DJ5	.866			
Interaction	IJ1	.831	.934	.932	.696
	IJ2	.820			
	IJ3	.824			
	IJ4	.843			
	IJ5	.856			
	IJ6	.831			
Procedural	PJ1	.857	.912	.913	.723
	PJ2	.837			
	PJ3	.856			
	PJ4	.851			
Satisfaction	SA1	.862	.910	.911	.719
	SA2	.851			
	SA3	.843			
	SA4	.834			
Words of mouth	WOM1	.868	.878	.879	.707
	WOM2	.870			
	WOM3	.782			
Revisit	RVI1	.865	.899	.899	.748
intension	RVI2	.850			
	RVI3	.879			
Notes:					

A normality test was conducted to evaluate the normality of data distribution, with skewness and kurtosis values between -2 and 2 considered acceptable [26]. The skewness ranged from -1.153 to 0.242, and kurtosis ranged from 0.342 to 1.406, indicating acceptable data distribution. Multicollinearity, which can bias path coefficients, was assessed using collinearity

tests. The results revealed minimal Variance Inflation Factors (VIF) among all constructs, ranging from 3.29 to 6.60, well below the recommended threshold of less than 10 [27].

Discriminant validity was evaluated by comparing the square root of Average Variance Extracted (AVE) with the correlations among latent constructs [28]. This requirement was met for all constructs, confirming discriminant validity. Harman's single-factor test was conducted to identify standard method bias inherent in cross-sectional data collection techniques. The analysis indicated that the variance explained was less than 50%, indicating that common method bias did not significantly impact this study. Table 3 presents the correlations among the constructs, further confirming the validity and reliability of the measurement model. Overall, the items used to measure the constructs in the model are valid and reliable.

Table 3 Discriminant analysis and covariance matrix

	AP	EX	PS	SR	DJ	IJ	PJ	SA	WOM	RVI
AP	.885									_
EX	.750	.881								
PS	.770	.838	.869							
SR	.809	.796	.842	.854						
DJ	.543	.535	.536	.535	.796					
IJ	.530	.548	.592	.530	.753	.834				
PJ	.504	.525	.552	.504	.792	.799	.850			
SA	.469	.494	.490	.499	.572	.584	.597	.848		
WOM	.384	.453	.437	.444	.479	.498	.510	.799	.841	
RVI	.397	.453	.423	.430	.462	.479	.519	.800	.832	.865

Note: AP = Apology, EX = Explanation, PS = Problem solving, SR = Speed of Response, DJ = Distributive justice, IJ = Interactual Justice, PJ = Procedural justice, SA = Satisfaction, WOM = Words of Mouth Communication, RVI = Revisit intention

Structural Model and hypothesis testing

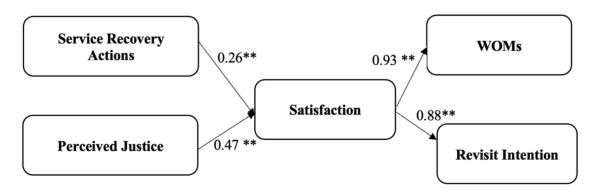
The structural model fit, and parameter estimation were assessed. The results indicated an acceptable model fit, with $\chi 2/df = 2.144$, GFI = .900, CFI = .969, RMSEA = .044, and SRMR = .025. Figure 2 and Table 4 present the statistical data from AMOS, including standardized regression weights, t-values, and R² values. These results provide insights into the relationships

between the variables in the structural model, allowing for a deeper understanding of the underlying mechanisms at play.

Table 4 Hypothesis Testing

Hypothesized Relationships	Standardized	t-	Hypothesis	
	Estimates	values	Supported	
H1: Service recovery actions > Satisfaction	.261	5.687	Supported	
H2: Perceived justice > Satisfaction	.468	9.489	Supported	
H3: Satisfaction > WOMs	.926	20.875	Supported	
H4: Satisfaction > Revisit intension	.883	22.298	Supported	
Squared Multiple Correlation (R2):				
Satisfaction	.44			
Words of Mouth	.86			
Revisit intension	.78			
Model Fit Statistics:				
$x^2/df = 2.144$, GFI = .900, CFI = .969, RMSEA	= .044, SRMR = .	025		

Table 4 displayed the path coefficient that the maximum is satisfaction to words of mouth (β = .926, t-value = 20.875, p<.001), the second is the relation of satisfaction to revisit intention (β = .883, t-value = 22.298, p<.001), the third is from perceived justice to satisfaction (β = .468, t-value = 9.489, p<.001), the last is service recovery actions to satisfaction (β = .261, t-value = 5.687, p<.001). Therefore, hypotheses 1 - 4 are supported. The squared multiple correlations showed the power of predictor of satisfaction, Words of Mouth, and Revisit intention at 44%, 86%, and 78%, respectively.



Notes: ** = p < .001

Figure 2 SEM Path Analysis

Multigroup Analysis

Hypothesis testing across service users, experienced and non-experienced, could reveal different customer mindsets and identify the level of service recovery strategy. According to Table 5, there was no significant difference in service recovery actions to satisfaction between experienced and non-experienced customers (p > .05). Therefore, hypothesis 5a was not supported. However, the analysis revealed that perceived justice to satisfaction was significantly higher in the non-experienced group than in non-experienced customers (p < .05), supporting hypothesis 5b. Regarding hypothesis 5c, the data showed no significant difference between the two groups in terms of satisfaction toward WOMs (p > .05). However, the relationship between satisfaction and revisit intention was significantly higher in the experienced group than in the non-experienced group (p < .05).

Table 5 Multiple group difference test

Hypothesized Relationships	Experienc	Non-	Group
	ed	experience	Differenc
	Customer	d	es
		Customer	
	Standardi	Standard	Δ
	zed	ized	CMIN/df
	Estimates	Estimate	
	(t-values)	S	
		(t-	
		values)	
H5a: Service Recovery Actions >	.305	.233	.032 n.s.
Satisfaction	(4.840)	(3.484)	
H5b: Perceived Justice >	.403	.524	4.499*
Satisfaction	(6.165)	(7.007)	
H5c: Satisfaction > Words of	.906	.955	.038 n.s.
Mouth	(15.117)	(14.625)	
H5d: Satisfaction > Revisit	.919	.836	6.001*
intension	(17.692)	(13.570)	

Model Fit Across the Group; CMIN = 2392.441, df =1146, GFI = 0.823, NFI = 0.898, CFI = 0.944; TLI = .938; RMSEA = 0.043; SRMR = .030 *Notes:* * = p < .05; n.s. = not significant

5. DISCUSSION

This study has delved into the intricate dynamics of service recovery strategies and their impacts on satisfaction, word-of-mouth (WOM), and revisit intentions. Our findings align with research conducted in international hospital settings, demonstrating that perceived justice as a component of service recovery significantly influences satisfaction and WOM et al.[29], [30]. Similar patterns have been observed in the banking sector, further corroborating the importance of perceived justice in enhancing customer satisfaction and promoting an optimistic WOM [31], [32], [33].

Service recovery actions have also been identified as influential factors in determining satisfaction with service recovery efforts. Our study aligns with existing literature in multinational service sectors and online retailing, where actions such as apology, explanation, problem-solving, and response speed have been found to positively impact customer satisfaction [34], [35], [4]. Our investigation into service recovery actions highlights nuances compared to findings in other industries. For instance, there is a preference for an apology in airline contexts, whereas the impact of problem-solving varies across different service businesses [36], [37]. Moreover, our study elucidates the relative impacts of service recovery actions and perceived justice. While both are crucial, perceived justice emerges as a more significant predictor of satisfaction. This underscores the holistic nature of perceived justice strategies, which may involve a combination of service recovery actions and employee efforts to meet customer expectations of fairness and equity.

Our findings reaffirm the interconnected nature of satisfaction, word-of-mouth (WOM), and revisit intentions. Consistent with prior research across various service sectors, our study highlights that satisfied customers are more likely to engage in positive WOM, thus enhancing marketing efforts [38]. Moreover, satisfaction emerges as a crucial driver for revisiting intentions, indicating the lasting impact of effective service recovery efforts on customer loyalty and repeat patronage [39], [40]. Thus, hypothesis 3 is supported. Our findings are consistent with previous studies demonstrating the influence of satisfaction on service recovery and recreational tourism experiences, [41], [42], [43] thereby supporting hypothesis 4. Our results suggest that successful service recovery efforts are intrinsically linked to customer satisfaction and subsequent behavioral intentions. This underscores the importance of effectively addressing service failures to not only restore satisfaction but also to positively influence customers' future behaviors, such

as recommending the service to others and returning for repeat purchases or visits. In essence, by prioritizing service recovery, businesses can not only retain satisfied customers but also cultivate loyal advocates who contribute to the company's long-term success [32], [44].

Our findings reveal a significant relationship between successful service recovery efforts, customer satisfaction, and subsequent behavioral intentions. When companies effectively address service failures, they not only restore satisfaction but also influence customers' future behaviors. For instance, satisfied customers are more likely to recommend the service to others and return for repeat purchases or visits. This highlights the critical importance of prioritizing service recovery in businesses. By addressing service failures promptly and effectively, companies not only retain satisfied customers but also cultivate loyal advocates. These loyal customers play a crucial role in the long-term success of the business, contributing to positive word-of-mouth, repeat business, and sustained profitability. In essence, effective service recovery is more than just fixing mistakes; it's about building stronger relationships with customers and ensuring their continued loyalty and support. Therefore, companies should invest in strategies and resources to enhance their service recovery processes, ultimately benefiting both their bottom line and their reputation in the market.

The multigroup analysis conducted in this study aimed to explore potential differences in the influence of service recovery actions and satisfaction on word-of-mouth (WOM) among two distinct customer groups. The results revealed a notably higher influence of perceived justice on satisfaction in the non-experienced group compared to the experienced group (PJ to SAT non-experienced).

The findings suggest that professional customers, who have previously encountered failures and recovery strategies, may be characterized as frequent visitors with established habits. Consequently, when facing service failures again, they may express lower perceived justice toward satisfaction. This could account for the weaker relation observed in the experienced customer group in this study. On the other hand, non-experienced customers, who have yet to encounter problems before, might perceive higher levels of perceived justice, as indicated by the results. This suggests that for this group, the perception of fairness in the service recovery process strongly influences their satisfaction levels. Therefore, it is crucial for service providers to consider the differing needs and perceptions of experienced and non-experienced customers when implementing service recovery strategies. Furthermore, the study identified a discrepancy

in the relationship between satisfaction and revisit intention between the two groups, with the experienced group exhibiting a more vital link than the non-experienced group (SAT to RVI non-experienced < SAT to RVI experienced). This disparity could be attributed to the differing levels of engagement with the hospital. The discussion may delve into the implications of satisfaction generation, considering the differing experiences and behaviors observed between the two customer groups.

The study's findings underscore the significance of perceived justice in shaping customer satisfaction, particularly among those who have yet to encounter service failures. It reveals that when customers experience service failures for the first time, their perception of fairness and equity in the resolution process strongly influences their overall satisfaction. This suggests that addressing perceived justice becomes paramount in such situations, as it can significantly impact customer satisfaction levels. Experienced customers, on the other hand, who may be more accustomed to service failures, may place less emphasis on perceived justice when evaluating their satisfaction. This differential effect emphasizes the need for service providers to tailor their service recovery strategies, ensuring fairness and transparency, especially for customers experiencing service failures for the first time.

The connection between satisfaction and revisit intention is pivotal in understanding customer behavior in service industries. Our multigroup analysis investigated this relationship by explicitly comparing two distinct customer groups: those who have previously experienced service failures and those who encountered failures for the first time. Surprisingly, the results uncovered a significant disparity in revisit intention between these groups.

The relationship between customer satisfaction and revisit intention is crucial in service industries, particularly in the context of service recovery. Our multigroup analysis examined this relationship by comparing two distinct customer groups: those who had experienced service failures before and those encountering failures for the first time. Surprisingly, the results revealed a significant difference in revisit intention between these groups.

Experienced customers, who had encountered service failures in the past, showed higher revisit intentions compared to those facing failures for the first time. This finding may appear counterintuitive, but it suggests that satisfaction and revisit intention are not solely determined by the absence of failures. Instead, the effectiveness of the recovery strategy plays a crucial role. Experienced customers may have developed resilience and understanding towards service

failures, placing less emphasis on them when evaluating satisfaction. Instead, they prioritize factors like overall service quality and their relationship with the service provider. In contrast, first-time failure recipients may be more sensitive to resolving their issues, with their satisfaction and revisit intentions heavily influenced by the recovery experience. This underscores the dynamic nature of customer behavior in service recovery contexts. It emphasizes the importance of tailoring recovery efforts to different customer segments to effectively address service failures and cultivate long-term customer loyalty.

6. CONCLUSION

The study examined the impact of service recovery strategies in private hospitals on customer satisfaction, word-of-mouth (WOM), and revisit intentions. The research light on the roles of service recovery actions and perceived justice, providing crucial insights into customer perceptions. Additionally, the study explored how different customer groups, based on their prior experiences of service failures, respond to service recovery efforts. The findings contribute to a deeper understanding of service quality and customer satisfaction in the healthcare service sector. They offer valuable guidance for future research and practice in this field, helping healthcare providers to better address service failures and enhance overall customer experience.

Theoretical contributions

This study contributes to the theoretical understanding of service recovery strategies by applying the Expectation Confirmation Theory (ECT) and the Social Exchange Theory (SET). ECT posits that when perceived performance exceeds expectations, it leads to confirmation, measured by satisfaction, and subsequently influences behavioral intentions. Our study found support for ECT, as satisfaction with service recovery strategies was influenced by the extent to which they met or exceeded customer expectations. Additionally, our findings align with SET, which explores the exchange relationship between satisfied customers and their subsequent intentions and actions. Specifically, we observed that satisfied customers exchanged their experiences through word-of-mouth (WOM) and revisited intentions, indicating the reciprocity inherent in in-service exchanges.

Moreover, our study highlights the importance of considering customer expectations and service failure experiences in shaping the effectiveness of service recovery strategies. By examining the interaction between perceived performance and customer expectations, we shed light on how the effectiveness of service recovery strategies may vary based on the extent to which

they meet or exceed customer expectations. Furthermore, our findings suggest that customers who have experienced service failures may have different expectations and responses to service recovery efforts than those who have not, underscoring the need for tailored approaches to service recovery based on customer experiences. Overall, our study offers valuable insights into the theoretical underpinnings of service recovery strategies and their implications for managing customer expectations and experiences in service contexts.

Managerial contributions

The study provides significant managerial contributions by adopting a comprehensive approach to service recovery strategies, which encompasses both tangible actions and perceived justice. The results emphasize the crucial role of frontline employees in shaping customer perceptions of fairness following service failures. This underscores the need for businesses to prioritize training initiatives aimed at enhancing employees' understanding and implementation of distributive, interactional, and procedural justice principles to augment customer satisfaction.

Furthermore, the study highlights the importance of tangible service recovery actions, such as apology, timely response, problem-solving, and explanation. Effective implementation of these actions can confer a competitive advantage to private hospitals by mitigating the adverse impacts of errors, reinstating customer satisfaction, and bolstering brand reputation. The suggested service recovery strategy serves as a valuable guideline, particularly for less experienced employees grappling with service errors.

Moreover, the study offers insights for senior management to proactively discern and address potential issues by assessing customer visit patterns and past experiences of failures. It emphasizes the need for quality managers to prioritize service recovery planning and remediation to mitigate risks associated with neglecting customer concerns.

Additionally, the study advocates for regular training sessions to enhance employees' proficiency in implementing systematic approaches to service recovery. Through these initiatives, employees can refine their skills in identifying dissatisfied customers and effectively tailoring recovery strategies to different customer segments. Simulated scenarios provide a valuable platform for employees to practice and refine their service recovery strategies across various contexts and severity levels of service failures, thereby bolstering competency and readiness.

Suggestion

The intensity of employee effort can primarily be gauged through the visible commitment demonstrated by staff in addressing customer concerns, fostering an environment where customers perceive their dedication to resolving issues. Previous research has underscored the significant impact of perceived effort in promoting forgiveness for service failures, even when service recovery proves inadequate [45], [46]. Future research could further explore the intricate relationship between employee efforts and customer satisfaction with the service recovery strategy.

Additionally, this study expands its investigation into the service recovery process by considering a broader range of service users, acknowledging the diverse perceptions that may exist among different customer segments. Variations in perceptions among service users are shared across various service sectors; for example, the expectations of first-time customers may vary from those of repeat patrons and the influence of personality traits, self-construal, and customers' emotional intelligence on service recovery outcomes [47], [48].

Thirdly, this article underscores the importance of considering forgiveness mechanisms for service failures and satisfaction with service recovery beyond direct actions. The topic may aim to explore indirect factors rooted in brand equity, such as brand familiarity, brand image, and perceptions of corporate social responsibility, which may serve as antecedents or moderation factors affecting satisfaction with the recovery strategy [49], [50], [51]. Additionally, cultural dimensions such as self-construal and generational characteristics (Gen XYZ) may significantly influence service recovery strategies and outcomes.

Nevertheless, online questionnaires have limitations in capturing unintentional responses, particularly in the context of varied device usage. Responses may be influenced by factors such as device type, screen size, and user interface, potentially introducing bias or inconsistency in the data collected. Future studies should consider employing additional methods or validation techniques to mitigate these limitations and ensure the reliability and validity of the findings.

To enhance research credibility with scenario-based questionnaires, researchers should provide clear explanations, incorporate diverse scenarios, validate questionnaire items, and supplement with alternative methods. These strategies bolster the reliability and validity of findings, strengthening overall research robustness. However, the scenario-based questionnaire, while valuable, has limitations that can affect the robustness of the results.

Conflicts of Interest: The authors declare that there are no conflicts of interest regarding the publication of this paper.

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