ABSTRACT

Although people have an increasing demand for medical care, patients not anymore play a dependent role that obedient to professional authority. Under the promotion of “medical consumerism,” how medical personnel avoid negative emotional response resulted from contact interaction may be a decisive factor of successive medical care service in a medical field with high contact characteristic. Most traditional scholarly discussions on service failure adopted Critical Incident Technique (CIT), but the analysis of respondents' data information was also scaled down by this method, and “moment of truth” of each interaction in service process cannot be discovered either. This study adopted Subjective Sequential Incidents Technique (SSIT) proposed by Chang, Chin-Hsu as a study method to analyze “moment of truth” of contact interaction in patients' experiences of taking medical service, with an attempt to propose a deep discussion on situational factors of service failures in medical outpatient services. Based on sixteen angry stories in outpatient situation, this study set up Subjective Service Delivery Blueprint for six main phases in medical outpatient services. In those angry stories, this study found five types of points that make customers angry (angry points): event-triggering angry point, situation factor angry point, inappropriate response, dramaturgic angry point, and admonitor. Among these angry points, situation factor angry point play its role in service delivery phase and has a feature of linking the last and next angry point. Thus, it is not only a concrete supporter of “moment of truth” continuity in the service failure process, but also provides a thinking concept for studies of recovery of service failure process.

Keywords : subjective sequential incidents technique, service failure, service recovery, moment of truth, subjective service delivery blueprint